FEELING FED-UP IN ADOLESCENCE: AN EXPLORATORY STUDY.

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ABSTRACT

The current study aimed at extending the scanty knowledge on the experience of everyday emotions in adolescence into an area previously unexamined, i.e., feeling "fed-up". The sample comprised 239 predominantly white New Zealand school pupils ranging in age from 10.5 to 15 years. Three variables were examined pertaining to developmental progression (age & pubertal status) and gender. Subjects completed a two part self-report questionnaire. The first section collected personal data and information on the frequency and duration, antecedents and behaviours associated with feeling "fed-up". A modified form of the DES IV comprised the second section with the intention to measure the patterns of emotions present within this state. The results indicate that feeling "fed-up", on average, is a reasonably frequent (few times per week) and short-term experience (less than half an hour). Pubertal status was found to effect the experienced duration of this state. The principle antecedents cited were everyday adolescent stressors (parents, school ,peers,etc.) rather than major global concerns. Most subjects coped with feeling "fed-up" by withdrawal or seeking entertainment. An increased variety and change of coping strategies was noted with age and pubertal maturation where more subjects used verbal ventilation and physical activities to cope. DES findings indicate that anger is the most prominent emotion in feeling "fed-up" followed by sadness and shame. Gender differences in emotion profiles suggest that feeling "fed-up" may be more unpleasant for females as they experienced significantly more frequent anger, sadness, and inner hostility and significantly less joy and interest than males. Overall, the current findings indicate that feeling "fed-up" is a short-term reactive emotional state that is sensitive to gender and developmental influences and which activates adolescents to act on and change their environment in an adaptive way.

CHAPTER ONE

INTRODUCTION

1. GENERAL INTRODUCTION

Most individuals use common adjectives to describe how they feel to others on a daily basis . These "emotional labels" are reference points for communicating emotions which are based on previous social/cultural experiences. Emotional labels can refer to a wide variety of positive and negative feelings. In our New Zealand society, individuals often allude to feeling "fed-up" to describe a certain form of everyday negative state. Examples of this term are common in advertising, e.g., "are you feeling " fed-up" with your old mattress ..." (T.V. Guide, 1991, p.24) and in other forms of written and spoken language, e.g., "superannuitants who say they are "fed-up" with the way the Government is treating them put their concerns over guaranteed retirement income to Prime Minister Jim Bolger today." (The Press, 13th June 1991, p1.) Naive observations from this investigator indicate that the term feeling "fed-up" is used to describe a mild form of despondency and aggravation. No previous scientific enquiry , however, has been conducted into the emotional nature of feeling "fed-up".

The adolescent population has been selected for this investigation because very few studies have addressed the nature of the adolescent emotion system. This is despite the fact that adolescence is viewed by many theorists and researchers as an extremely important transitional period with

the onset of puberty and the restructuring / consolidation of identity aided by increased cognitive capacities. Various theories have acknowledged the importance of these developmental factors in initiating and maintaining the supposed intense psychological upheaval and rapid mood swings apparent during this period (e.g., Hall, 1904, Freud, 1938, Rutter, Graham, Chadwick & Yule, 1976, Newman & Newman, 1979).

Although most theoretical paradigms emphasise the notion that negative emotions, including depressive feelings, are normal and a consequence of this period, very few empirical investigations have attended to "normal" depressive everyday feelings in adolescence. Most references for normality have being extrapolated from psychopathological studies (Offer , Ostrov & Howard, 1982) or studies of adults and children (e.g., Izard & Schwartz, 1986). Those studies which have addressed adolescent depressive feelings have often failed to account for the unique social and biological interactions occurring during this period, being guided solely by age criteria (e.g., Carlson & Cantwell, 1979, Kandel & Davies, 1982, Kashani, Carlson, Beck, Hoeper, Corcoran, McAllister, Fallahi, Rosenberg & Reid, 1987, Weiss and Weiss, 1988). Gender and cultural issues have also been ignored, to a large extent, in the non-clinical area. Studies which do exist indicate that gender differences in the patterning of depressive experience and emotions may stem from social aspects of the pubertal transition as well as increasing age (Weiss & Weiss, 1988).

Even though views regarding the nature of emotions during adolescence might be widely held, they lack empirical support. Studies of normal everyday feelings in adolescents are few and far between. This thesis, therefore, proposes to examine empirically the nature of feeling "fed-up" in

adolescence by focusing on the variability of this state, the antecedents and subsequent behaviours associated with it as well as the emotions present within it.

To address the issue of emotional development relevant to adolescence the following introductory section is organised in three major parts. The first part deals with theoretical formulations pertaining to emotional development in adolescence. Theories are discussed in historical order beginning with the first acknowledgement of adolescence as a discrete developmental period, by the evolutionist, Stanley Hall (1904). Other theories discussed in this section include those from the psychoanalytic, cognitive, physiological and emotion schools. Theories are considered in relation to the questions they raise and their predictive capacity concerning the experience of emotion in adolescence.

Part two of the introduction deals with the empirical research on emotions in adolescence. Results are presented and discussed in a format which is conducive to providing possible answers to the question posed in the theoretical section. Discussed in this section are definitional issues and the problems surrounding current age based definition. The research available on emotional variability in adolescence as compared with adults and children is then addressed. Lastly empirical investigations into depressive mood in adolescence are discussed. The main areas of research addressed are; elicitors of depressive mood, coping behaviours associated with depressed feelings and emotional patterns in depressive states.

The final part of the introduction focuses on the rationale for the current study. The aims of the current study are discussed including the rationale for selecting a particular adjective to study emotion, why each

variable to be studied was selected and lastly why the particular method, i.e., self-report was used.

2. THEORETICAL FRAMEWORK: THEORIES PERTAINING TO EMOTIONAL DEVELOPMENT IN ADOLESCENCE

2-1. EVOLUTIONARY THEORIES

The first scientific acknowledgement of adolescence as a discrete developmental period can be traced back to G. Stanley Hall (1904). Based on the theories of Darwin (1859, cited in Dusek, 1987) Hall developed his own version of Evolutionary Theory which pertained to adolescence, called Recapitulation. The notion of Recapitulation implies that the stages in human development today mirror the experiential history of the species (Hall, 1904). From this viewpoint emotional as well as cognitive and social development are genetically determined. According to Hall (1904) a child is instinctually driven until adolescence. As the child develops into an adolescent, he/she develops a heightened susceptibility to environmental influences. These environmental influences led to a period of "storm and stress". This "storm and stress" is assumed to be a normal developmental progression and reflects the period in evolutionary history when the human race was in a turbulent and transitional stage.

With increasing empirical investigations the notion of general intense turmoil as "normal" in adolescent development has become less accepted (Van Hasselt & Hersen, 1987). Some researchers believe that "storm & stress" is more indicative of abnormal development (e.g., Larson,

Csikzentmihalyi & Graef, 1980) whilst others suggest that rather than general turmoil there is a trend towards more negative emotions regarding the self (Rutter et al 1976). Despite these findings Hall's (1904) conceptualisation of adolescence as a period of intense emotionality and rapid changes involving biological determinants has influenced many subsequent theoretical and empirical endeavours.

2-2. PSYCHOANALYTIC THEORIES

Psychosexual Theories

Sigmund Freud, the originator of psychoanalytic theory, was also greatly influenced by Darwin's evolutionary stance and Hall's (1904) notions of "storm and stress" in adolescence (Van Hasselt & Hersen). He believed that human being's essential psychological nature was one of passion and desire (Freud, 1938). The task therefore for development was to transform these desires into socially acceptable and rational behaviour (Dusek, 1987).

Freud recognised the importance of pubescent biological changes during adolescence and saw these as the instinctive driving force (Freud, 1938). According to Freud, sexual drive (or libido) dominates this period and influences psychological functioning (Freud, 1938). The type of excitement thought to emerge with pubertal onset leads to a feeling of pleasurable and unpleasureable tension (Freud, 1938). The stress created by this dilemma produces anxiety, which in turn, leads to the development of defence mechanisms. Defence mechanisms (e.g., withdrawal, regression, repression) are seen as mostly adaptive, restoring the individual to equilibrium (Freud, 1938, Freud, 1958). Implied in this theory is the notion that negative emotions (in this case anxiety) which are produced by stressful antecedents,

motivate the individual to behave in a way which is adaptive for them. The notion of emotions as adaptive has been adopted by many contemporary theoretical models, for example, Izard (1985).

The importance of pubertal timing in adolescent development has also been highlighted by more contempory psychosexual theorists. Blos (1962) emphasises the need for harmonious integration of psychological and biological factors during the first phase of adolescence. Effective adaptation is dependent upon the timing of these two factors. According to Blos (1962), adaption can only occur when psychological preparation precedes biological events.

Adolescence proper is characterised by the removal of psychic investment in caregivers and significant others who were important during childhood, leaving free energy to invest in peer relationships (Blos, 1962). Negative emotions which are prevalent at this time, such as depression, are the result of the separation process (Blos, 1962).

Unlike Freud (1938), Blos (1962) recognises the influence of social factors on adolescent development in general and emotional development in particular.

Psychosocial Theories

Eric Erikson (1963) modified Freud's conceptualisations to better fit the nature of adolescent development. The main concept of Erikson's theory centers around the acquisition of ego identity (the sense of who and what a person is) and the ability of the ego to deal with a series of eight developmental crises throughout the individual's lifespan (Turner & Helms, 1983). During adolescence the development of identity is the primary task (Erikson, 1959). The adolescent during this stage (identity verses identity

confusion) has the task of developing an integrated self which is distinct from others, based not only on childhood experience but future opportunities for social roles and intellectual endowment (Erikson, 1959).

Erikson (1959, 1963), equally stresses biogenetic and social-cultural factors in his theory. His theory recognises the importance of the individual in contributing to their own development (including emotional development).

2-3 THE THEORETICAL RELATIONSHIP BETWEEN COGNITIVE AND EMOTIONAL DEVELOPMENT

Psychoanalytic theories see human beings as essentially irrational and biologically driven, whereas cognitive theories adopt a view of man as a more rational and conscious being. The main concern of cognitive developmental theorists is the qualitative acquisition of logical thought (from which emotions derive) from infancy to adolescence (Newman & Newman, 1979). The most prominently recognised cognitive developmental theorist is Jean Piaget. Although Piaget never actually postulated a theory of emotional development per se, he included affective development within his general cognitive theory (Wadsworth, 1984). Piaget's "Theory of Affect" therefore has been derived from his original work by other theorists.

Piaget believed that nearly all emotions are present at birth or develop during the first month of life (Cicchetti & Hesse, 1983). The developmental progression of both cognitions and emotions is fixed and cumulative (Wadsworth, 1984). Like cognitive development, emotions develop through the processes of assimilation and accommodation (Anthony, 1976).

Assimilation and accommodation are terms Piaget uses to describe cognitive processes for dealing with information (Wadsworth, 1984). In assimilation the individual integrates new perceptual, motor and conceptual matter into their existing schemata (cognitive structure) (Wadsworth, 1984). This process allows for the growth of existing schemata. When the incoming information becomes too distant from the knowledge contained in the existing schemata the process of accommodation occurs. Accommodation is the creation of new schemata or the modification of old ones (Wadsworth, 1984).

Like the Evolutionary and Psychoanalytic theorists, Piaget believed that emotions had adaptive value (Strongman. 1987). Emotions were seen as the energisers in development whilst cognitions provided the structure (Strongman, 1987). Cognitive and affective development was seen in terms of interrelated and parallel running systems (Strongman, 1987). Piaget argued that emotions could not be understood without reference to the wholes in which they are organised (Anthony, 1976).

Piaget delineated various discrete stages of development based on a lawful progression from infancy to adolescence (Decarie, 1978, Wadsworth, 1984). The final stage (Formal Operations) begins from approximately eleven years of age. Two main developments occur during this period. Firstly the adolescent develops the ability to think about things hypothetically (Wadsworth, 1984). Applying this to the affective domain, Wadsworth (1984) argues, idealistic feelings develop based on adolescent interpretations of real world events, however perceived discrepancies between the ideal and real worlds lead to feelings of disgruntlement . The second major

development is the formation of personality. Personality formation is due to the autonomous efforts of the adolescent to adapt to the social environment (Wadsworth, 1984).

More recent transformations of Piaget's theory, whereby the functions of emotions are observed in relation to situational antecedents, have indicated that emotions are entities in themselves, i.e., they have their own meaning and nature (Cicchetti & Hesse, 1983). Although cognitive processes are involved in the development of emotion the causal direction is not as clear as Piaget & Inhelder (1969) once postulated (Cicchetti & Hesse, 1983). Various attempts have been made to differentiate types of emotions and their progression through development. Weiner & Graham (1985), for example, measured a developmental shift from outcome linked (undifferentiated, short lived and high intensity) emotions in young children to more attributional socially linked and complex emotions in adolescence. Despite this shift, outcome dependent emotions e.g., anger, were still apparent in adolescents and adults emotional repertoires (Weiner & Graham, 1985).

It seems likely from this viewpoint that there are different "types" of emotion and that as the individual develops situations, people and events may elicit more complex emotions through cognitive mediations.

2-4. PHYSIOLOGICAL CONCOMITANTS AND EMOTION IN ADOLESCENCE: THEORIES

The relationship between biological change and emotion during adolescence is not directly addressed in theory however many physiological

and emotion theories implicitly suggest connections between these two domains.

Various physiological structures have been associated with emotion in the literature, i.e., the brain-stem, thalamus, hypothalamus, the limbic system and to an extent the neocortex (Strongman, 1987). According to Strongma (1987), endocrine changes and underlying neurochemical changes have also been implicated in emotion. For adolescence, the hypothalamus and endocrine system have particular relevance. According to Katchadourian (1977), changes in the sensitivity of the hypothalamus result in it allowing higher levels of hormones, which are responsible for the onset of puberty. Three endocrine systems are involved in pubertal development (Richards & Petersen, 1987). The adrenal system is the first to begin maturing and this is followed by the gonadal system and hormones related to menarche (for females only). Increasing levels of estrogens and progestins (for females) and androgens (for males) characterise pubertal endocrine change. These endocrine changes begin quite early in the pubertal process with increases in some hormones beginning as early as seven (Grumbach, Roth, Kaplan & Ketch, 1974). Pubertal endocrine changes lead to physiological changes which affect facial appearance, body shape, weight, height and the development of secondary sex characteristics (Tanner, 1975).

Two models have been devised to describe the relationship between physiological changes and psychological effects. The Direct-Effects Model attributes certain psychological effects directly to physiological sources and discounts historical and cultural influences. (Richards & Petersen, 1987,

Dubek, 1987). The model has been developed mainly from animal studies (e.g., Pfaff, 1980) however a few recent developmental studies have indicated linkages between hormones and emotions (e.g.,Melges & Hamberg, 1977, Olweus, Mattsson, Schalling & Low, 1980, Susman, Nottelmann, Inoff-Germain, Dorn, Cutler, Loriaux & Chrousos, 1985). Gellhorn (1964, cited in Strongman, 1987) a recognised physiological emotions theorist, adopts this model in explaining wider mood states (e.g. depression) as well as emotions per se (Strongman, 1987). Gellhorn suggests that the continuous balance between two opposing biological systems, i.e., ergotropic and trophotropic, reflects emotional reactivity (Strongman, 1987)

The Direct-Effects Model, according to Dusek (1987) has not received overwhelming support from researchers because of the difficulties in clearly demonstrating direct links between biological effects and psychological development. Analysis is also limited from this perspective because it is assumed that biological changes have a uniform effect on adolescents i.e., no allowance is made for individual differences.

The empirical difficulties highlighted in the Direct-Effects Model have led many researchers to adopt a model which acknowledges the importance of intervening and moderator variables within the biological/psychological interaction (Richards & Peterson, 1987). The Mediated-Effects Model emphasises the importance of individualistic personal variables and socio-cultural variables in moderating or mediating the effects of hormones and physical change on psychological phenomena (Richards & Petersen, 1987). The model is interactionist in that it emphasises aspects of adolescent development that co-occur with pubertal change. Some mediating factors found to be important to pubertal timing at adolescence are gender and social

norms (Petersen, 1983).

The Mediated-Effects Model emphasises the importance of interactional cognitive and biological factors, i.e., the adolescent's interpretation of the ongoing biological changes within the socio-cultural norms and the transactional effects that this biological change has on significant others.

2-5 EMOTION THEORIES : THE CONCEPT OF EMOTIONAL DEVELOPMENT

It is evident from the developmental theories discussed thus far, that there are several apparent schools of thought regarding the nature of emotion in development. Although not mutually exclusive they tend to group into those who see emotions as biologically and/or socially adaptive and motivating phenomena (e.g., Hall, 1904, Freud, 1938, Blos, 1962,) and those who see cognitive processes and interpretations as directing emotional development (e.g., Piaget & Inhelder, 1969 , Wadsworth, 1984, some of those who adopt the Mediated-Effect Model)

These theories have their primary emphasis directed toward all aspects of developmental phenomena and are therefore designed to comprehensively account for the changing nature of the individual throughout childhood and/or the lifespan. Emotion is viewed from this perspective as an implicit phenomenon within a more global theory. Emotion theorists however, recognise emotion as an explicit system which affects and is affected by other systems (Strongman, 1987). Therefore from this perspective emotion is given the primary emphasis (Strongman, 1987).

The cognitive-contextual and biosocial dichotomy also dominates theory of emotion (Izard, 1985). Cognitive theorists represented, for example, by Schachter (1971), Mandler (1975) and Kagan (1985), see the cognitive appraisal and labelling of undifferentiated states of physiological arousal and the context in which they occur as the primary determinant of emotion. Kagan (1985) emphasises the importance of cognition and context in the development of emotion. Kagan (1985) sees emotion as a "superordinate term" representing the relations between external incentives, thoughts and detected changes in feeling states (Kagan, 1985). Kagan (1985) argues that emotion develops initially through the association of environmental events to feeling states and later facial expression. With further cognitive development, emotion responses increasingly involve evaluative processes based on prior experiences. By five or six years of age affects develop which relate to the child's increasing ability for self evaluation e.g., insecurity, pride, humility, jealousy etc. The development of the concept of group membership is important in this self-evaluation process. Kagan (1985) suggests that in evaluating the self, children will compare themselves to those whom they see are similar by nature of family, sex, cultural background or school level. As adolescence approaches, further cognitive development takes place allowing the adolescent to confront their existing knowledge reexamining beliefs and searching for inconsistencies among them. Common inconsistencies at this age Kagan (1985) suggests, are religious beliefs, parental and family beliefs and sexual beliefs. According to Kagan (1985), the ability to see many alternatives and hypothesise that no solution is possible leads to complex emotional reactions such as hopelessness and depression.

Proponents of the biosocial school (e.g., Plutchik, 1980, Izard, 1985, Izard & Schwartz, 1986, Campos & Barrett, 1985) emphasise the importance of innate neurological processes in emotion as well as social and experiential concomitants. Theorists from this viewpoint take the view that cognitions are neither essential nor sufficient in explaining emotion (Campos & Barrett, 1985).

The most comprehensive theory currently available which deals with emotional development from this perspective has been proposed by Izard & Malatesta (1984). Derived from Izard's (1977) Differential Emotions Theory, the basic premise of the theory is that the emotion system is but one of several independent, but interrelated systems which exist within the individual. The "emotion system" is comprised of a limited set of fundamental discrete emotions which have motivational value for further development. Each emotion has organisational and adaptive significance which is derived from neurochemical, motor-expressive and subjective-feeling components. These three emotional components form the categories which make up the twelve theoretical postulates of Izard & Malatesta's (1984) theory. Although the theory is primarily based on empirical work with animals, infants and adults, many of the postulates have direct application for work with adolescence.

The first three postulates deal with the neurophysiological component of emotion. It is not intended that these will occupy much discussion here as they have limited reference to this thesis. Izard & Malatesta (1984) suggest in these postulates that each emotion has its own neural substrates implying that emotions are cross-culturally consistent as well as innately determined. It is also suggested that two preadaptive features govern the development of

emotion, i.e., canalization & plasticity. According to Izard & Malatesta (1984), initial developmental growth is genetically determined but adaptive modifications and additions are made later to allow the individual to control certain emotional expressions appropriate to social demands. It is also suggested that the development and organisation of the brain allows for the generation of emotion directly, without cognitive mediation. Emotions are seen to influence cognition which in turn may influence emotions.

In terms of adolescence, these three postulates indicate that fundamental emotions may be experienced by all adolescents world-wide however there may be differences in the way emotions are expressed in adolescence due to interactions with environmental factors such as family, peers, sex roles and cultural determinants etc. as well as the level of neurological maturation.

The next three postulates proposed by Izard & Malatesta (1984) concern the expressive component of emotion. Postulate 4 states that "expressive behaviour undergoes functional changes, developmentally, in two ways. First, there are obvious changes in the kinds of events and situations that can elicit emotions. Secondly, there is a shift from the predominance of reflexive movements to expressive behaviour based on enculturation and learning" (Izard & Malatesta, 1984, p. 15). Although this postulate is primarily based on empirical work focusing on facial expression, it implies the involvement of a much larger behavioural component. Izard & Malatesta (1984) suggest that over time emotional expression becomes less reflexive and more actively purposeful in that it increasingly serves to fulfil social goals. The social goals for adolescents are often seen to compete with parents, teachers and other groups (Richards & Petersen, 1987). Therefore although the expression of

emotion may be adaptive for the adolescent, it is likely that it will cause some friction between the various groups involved.

The fifth postulate suggests that emotional expression changes with development from an overt "all-or-none" quality to a more modulated form (Izard & Malatesta, 1984). It is suggested here that changes occur in the frequency, range, discreteness and integrity of expression with development. In this postulate Izard & Malatesta (1984) point to the increasing complexity and subtlety of emotionally expressive cues with age. They discuss the decrease in overt emotional lability and negative expression as well as the increase in emotional blends and miniaturised (partial) expression with age. Adolescence is viewed as a period of refinement in that the essential changes are seen to have already occurred in late infancy to early childhood. The process of refinement is seen as life long with adolescence being situated in the beginning refinement stages. From this position adolescents should express emotions more overtly and less subtly than their older adult counterparts.

The last postulate concerning the expressive component of emotional development, deals with the link between emotional expression and the experiential component of emotion (Izard & Malatesta, 1984). Unlike some emotion theorists who implicate cues from the central and autonomic nervous system in the generation of emotion feelings (e.g., Buck, 1980, Ekman, Friesen & Ancoli, 1980) , Izard & Malatesta (1984) argue that feedback from the striate musculature and skin (especially that of the face), plays an essential activation role in the subjective component of emotion. With increasing maturity the individual becomes better able to modify and

regulate their emotional expression and thus their feelings. These modifications are sensitive to cultural and social determinants.

The adaptive role of emotional expression for intraperson emotional experiences is only one aspect emphasised by Izard & Malatesta (1984). Emotional expression is also seen transactionally in that it is significant as a motivator of interpersonal emotion and behaviour. Other people's emotional expressions act in a barometric sense relaying information which may determine what an individual or group feel and how they label that feeling . The labelling of ones own and others internal emotional states from expression cues motivate individuals to behave in socially and culturally adaptive ways. Age and sex differences in emotional feeling, expression and behaviour are seen to reflect the goals for culturally defined gender and age norms (Izard & Malatesta, 1984) . It seems likely from this view that in adolescence any differences in emotional feeling, expression and behaviour due to the level of pubertal development will also be socially and culturally determined.

The next six postulates of Izard & Malatesta (1984) relate to emotional experience. Postulates 8, 9, 11 and 12 involve ideas which bear direct relevance to this thesis. Postulate 8 states that "the feeling component of each fundamental emotion has unique adaptive and motivational functions" (Izard & Malatesta, 1984, p.49). Complex emotional states such as empathy allow the reception of negative as well as positive emotions from other people and motivate the individual to perform helping behaviours. Izard & Schwartz (1986) argue that emotions are inherently adaptive even in negative states such as depression however it is the mismatch of inappropriate cognitive, social and motor processes which are central to the

cause of such syndromes.

Emotional consciousness is the subject of postulate 9. Izard & Malatesta (1984) maintain that some level of emotion is always present in consciousness. The awareness of feeling, separate from, but in concert with cognition, is seen as continuous and occurring throughout the lifespan. The duration of a particular emotional feeling according to Izard & Malatesta (1984) is determined by cognition and the level of particular hormones and neurotransmitters. If this notion is extrapolated to the adolescent period then it seems likely that the extreme pubertal hormonal changes during this time may markedly effect the duration of emotional feelings in some way.

The eleventh postulate specifically mentions the period under investigation in this thesis i.e., late childhood and early adolescence. It is stated that "in late childhood and early adolescence, the ability to symbolise emotions is joined with the capacity to deal with them as abstractions, increasing the possibility for both conflict and personality integration" (Izard & Malatesta, 1984, p. 55). The ability to concurrently experience a feeling and deal with other feelings symbolically is important for the development of emotion regulation. This ability develops over childhood as particular feelings and patterns of feelings become associated with particular classes of images, symbols and actions (Izard & Malatesta, 1984). Emotions are seen as the main driving and organising force in this progression in that they determine what is perceived, remembered and how we behave (Izard & Malatesta,1984). Therefore symbolic phrases or constructs such as "feeling fed-up" become associated with a particular pattern of feelings throughout childhood and thus by adolescence, when this phrase is mentioned in conversation, the individual is able to symbolise that feeling in

consciousness irregardless of whether they actually feel "fed-up" at that particular time.

The last postulate attempts to explain the role of emotions in "dysadaptive" and psychopathological processes. The central theme of the postulate is that emotions retain motivational and adaptive functions within complex emotional states such as depression. Izard & Malatesta (1984) argue that the pattern of emotions present in depression (i.e., sadness, self-directed hostility, anger, shame and guilt) all have adaptive purpose. Sadness the most prominent emotion, for example, is seen to function as a warning mechanism, i.e., it focuses the individual's attention of loss, failure and defeat. This change in perspective facilitates recall of previous sad events and previously effective coping strategies. Anger, another predominant emotion in depression, is seen as an important ameliorator of depression in that it provides increased energy and self-assurance as well as being an effective suppressant of sadness and fear (Izard & Malatesta, 1984).

2-6 THEORETICAL PERSPECTIVES ON THE NEGATIVE STATE OF DEPRESSION

The existence and nature of emotional states such as depression has undergone wide philosophical debate in the literature (Kendall, 1976, Farmer & McGuffin, 1989). Central to this debate is the heterogeneous character of the components in depression and the confusion that arises from this fogginess. Semantic differences in terminology have in part, been blamed for this confusion. People may often use the term "feeling depressed" in the course of everyday conversation. However in using this term they are not referring to the same symbolic representation of "depression" that clinicians

may refer to in the course of their work. Differences would exist in the symptomology, etiology, prognosis etc.

The semantic differences which arise in the usage of the term "depression" both within professional circles and in everyday life, are in part fuelled by basic dichotomous philosophical differences. Meyerians take a unitary view of depression conceptualising it in terms of severity (Akiskal, 1983). Therefore mild everyday depression is seen as essentially the same entity as severe clinical depression. Kraepelin schools however view depression in binary terms making the distinction between endogeous (physiologically based) and exogenous (reactive stressor based) syndromes (Kendall, 1976). Akiskal (1983) takes this notion further by suggesting that exogenous depression consists of a number of qualitatively distinct subtypes including mild everyday depression. Very few theorists have solely addressed the phenomenological or experiential nature of depression. Izard (1985) appears to adopt a Meyerian viewpoint regarding the role of emotion in depression stating that the patterns of emotion in "normal" and "abnormal" depression are quite similar.

The quantitative Vs. qualitative arguments also exist within the literature pertaining to developmental patterns in depression. Some developmental researchers have suggested that depression is phenomenologically different for infants, children and , adolescents/adults (Gaensbauer, 1980, McConville, Boag and Purohit, 1983, Campos & Barrett, 1985, Izard & Schwartz, 1986,) Izard & Schwartz (1986) suggest that sadness predominates in the patterns of emotions in depression during early infancy. Five year olds are more likely to have experienced anger in relation to sadness themselves and by nine years of age, self evaluative feelings are

reflected in depression. Mc Conville, Boag & Purohit (1973) have noted a decrease in the prevalence of affect-predominant depression and increase in self evaluative depression with age.

Although Izard & Schwartz (1986) suggest that differences in phenomenology may exist between infant and childhood depressions they treat adolescent and adult depressions as essentially the same by combining them in their study and in subsequent discussions of depression.

2-7 SUMMARY AND CONCLUSIONS

The various theories reviewed highlight either explicitly or implicitly the importance of the adolescent period in the development of emotions. Emotion has been considered in relation to evolution (e.g. Hall, 1904, Freud, 1938, Blos, 1962), innate and biological processes (e.g., Freud 1938, Katchadourian, 1977, Susman et al 1985,) including social and cultural mediators (Erikson, 1959, Richards & Petersen, 1987), cognitive development (e.g., Cicchetti & Hesse, 1983, Piaget & Inhelder, 1969, Wadsworth, 1984, Weiner & Graham, 1985) and emotion as an independent system itself (Kagan, 1985, Izard & Malatesta, 1984, Izard 1985, 1986, Campos & Barrett, 1985).

Although early accounts from Hall (1904) of the adolescent period as one of "storm and stresses" have been largely refuted it appears that negative feelings which pertain to the self are particularly common in adolescence (Rutter et al, 1976). The essential nature of these negative everyday depressive-type feelings is uncertain at the philosophical level with continuing debate between the Meyerian (unitary) Schools, the Kraepelin

Schools and various subsidiaries of these.

Theoretical explanations have been advanced regarding causes or the driving force behind the noted increase in self referent negative emotions during adolescence. Proponents of the adaptive/ biological schools (e.g.,Hall, 1904, Freud, 1938, Blos, 1962, Katchadourian, 1977, Plutchik, 1980, Campos and Barrett, 1985, Dubek, 1987) suggest that pubertal effects and timing are responsible, either directly or mediated through social and cultural variables, for this increase. Those who subscribe to the cognitive view argue that changes in the phenomenology of emotion are tied to cognitive-age related factors (e.g., Schachter, 1971, Kagan, 1985, Piaget & Inhelder , 1969, Wadsworth, 1984).

As well as affecting frequency , biological-pubertal and cognitive-age factors have been implicated in the duration of emotion experienced. Hormonal changes and cognitive development affect the duration of emotion experienced, according to the Izard & Malatesta (1984). Adolescents experience the greatest physiological change (apart from the first two years of life) over the life span (Turner & Helm, 1984) and therefore it is likely that the upsurge of various hormones in puberty may in some way effect the durational experience of emotion.

According to theorists such as Erikson (1959), Kagan (1985) Izard & Malatesta (1984) and Richards & Petersen (1987) social and cultural variables are influential in generating certain emotional states. Erikson (1959, 1963) emphasises the importance of recognising social roles and making inferences learned from earlier environmental interactions, to emotional development in the adolescent stage. The ability to evaluate the self in relation to environmental experience is also emphasised by Kagan (1985). Izard &

Malatesta (1984) argue that environmental interactions (appropriate to life stage) provide cues which motivate the individual to feel and express emotions in socially adaptive ways. One might therefore expect that significant others during adolescence (e.g., parents, siblings, peers) and significant objects and interests will elicit differing emotional responses and behaviours in this group as they matures and takes on new roles involving sexuality, familial and non familial relations, recreational and productive activities (Richards & Petersen, 1987). Therefore factors such as pubertal status, age, gender and race may influence both the antecedents of emotional feeling and the subsequent behavioural responses.

The importance of cognitive development in adolescence is also highlighted by a number of theorists, especially in relation to the increased ability to symbolise and develop schema for emotions (e.g., Piaget & Inhelder, 1969, Cicchetti & Hesse, 1983, Wadsworth, 1984, Izard & Malatesta, 1984, Weiner & Graham, 1985, Kagan, 1985). With increasing ease, adolescents are able to understand and access linguistic references to emotional states without necessarily being in that state. This increases intrapersonal understanding and allows the adolescent to integrate others experiences into his/her own world.

2-8 QUESTIONS ARISING FROM THEORY

The theoretical literature outlined above raises a number of possibilities concerning the nature of everyday emotional experience in adolescence. Several hierarchical levels of questioning may be addressed. These levels interrelate each impacting on the next. Firstly, at a superordinate level are the issues relating to the general effects of ongoing development in adolescence (biological, cognitive and social). On a secondary level are questions pertaining to the nature and variation of emotions in adolescence. Underlying these issues are specific questions relating to aspects of the experience of emotion in adolescence.

Questions concerning the effects of ongoing development:

1/ What are the stages of pubertal change and do these relate to emotion?

2/ Are there changes associated with age and therefore cognitive development which relate to emotion ?

3/ How do important social roles, i.e., gender and race affect aspects of emotion?

Questions concerning the nature of emotion in adolescence:

1/ What differences are there in adolescent emotions that distinguish them from childhood and adult emotion?

2/ What are the similarities between adolescent emotion and childhood and adult emotion?

Specific question areas:

Mood variability:

1/ Do negative emotions occur more frequently in adolescence than in childhood or adult life stages?

2/ Are there changes in the duration of negative emotions experienced, and if so, in what direction does this change occur?

Antecedents of negative emotion:

1/ What important variable cues are identified in adolescent life which pertain to negative emotion?

Expressive behaviours associated with negative emotion:

1/ When feeling emotionally aroused what do adolescents do? What coping strategies do they employ?

Phenomenological aspects of everyday negative mood:

1/ What emotions are involved in everyday depression?

2/ What differences/similarities are there in emotional experiences between everyday depression and clinical depression in adolescence?

A number of studies have implicitly or explicitly addressed these questions. The following section will review the research and discuss how results relate to the various levels of theoretical questions posed.

3. EMPIRICAL RESEARCH: EMOTIONS IN ADOLESCENCE

3-1 DEFINING ADOLESCENCE: THE PUBERTY VERSUS AGE DEBATE

Many definitions have been offered for adolescence but most emphasise this period as an "in-between" or adjustment period carrying the individual from childhood to adult status:

> (Adolescence) is the stage in which the individual is required to adapt and adjust childhood behaviours to the adult forms that are considered acceptable to his or her culture. (Dusek, 1987, p.5).

Although adolescence is often identified as an important transitional stage in the literature, defining it operationally has proved to be a much more difficult task for researchers. The majority of studies which have investigated negative affect in childhood and adolescence have used age as the criterion for distinguishing the two groups (e.g., Carlson & Cantwell, 1979, Kandel & Davies, 1982, Kashani, Reid & Rosenberg, 1987, Mitchell, Mc Cauley, Burke & Moss, 1988,). Various ages have been used as a "cut-off" for adolescence, with most studies including subjects in the adolescent group after 12 or 13 years of age (Carlson, & Cantwell 1979, Kandel & Davies, 1982, Kashani et al, 1987, Mitchell et al, 1988). Some studies, such as Kashani et al's (1987), use representative age groups i.e., 8 years (childhood), 12 years (early adolescence) and 17 years (later adolescence) to compare levels of depression and other negative affects, whilst others include various age groups within their definition of childhood and adolescence (e.g., Mitchell et al, 1988).

There are many problems in using age as a sole criterion for defining adolescence. Firstly , there is a considerable variation (up to five years) in the

age of onset of pubescence (Tanner, 1975). In addition, males and females differ considerably in the pubertal and social stages of adolescence. The onset of puberty for females is generally earlier than for males (Tanner, 1975) and therefore defining adolescence solely by chronological age may give inaccurate results. Finally, age is not a psychological variable in itself, although it is highly associated with cognitive development in children (Turner & Helms, 1984). If chronological age is used for research it should be used as an appropriate marker for some psychological variable such as cognitive development and processing.

Other investigations have indicated that puberty may be a more salient transitional marker than age, in terms of emotional development (Brooks-Gunn & Warren 1985, Susman et al, 1985, Duncan, 1985, Lerner, 1985, Dorn, Crockett, Petersen, 1988, Brook-Gunn & Warren, 1989). There is some direct physiological evidence which indicates that endocrine status and negative emotionality may be linked, especially for males (Susman et al, 1985). Early maturing boys were found to have a higher level of sad affect than later maturing boys (Susman et al, 1985). Unfortunately studies focusing specifically on direct hormone effects in adolescence (e.g., Melges and Hamberg, 1977 Susman et al, 1985,) have found that these factors account for only 4% or less of the variance in negative emotional expression (Brooks -Gunn & Warren, 1989). Social factors in contrast were found to account for considerably more variance (Brooks- Gunn & Warren, 1989).

The importance of social factors in puberty is emphasised in Tanner's (1975) account of growth and development, before, during and after puberty. He states that physical manifestations are tied to social development in that adolescents behaviour and relations are conditioned by their physical status.

According to Tanner (1975), adolescents who physically mature early are more likely to dominate their peers in social activities such as sports. Apart from physical advantages, Lerner (1985) argues that more mature adolescents also receive greater positive feedback from their peers and society in general, than do later developers. Early maturing boys, for example, are more likely to be given responsibility and leadership roles by their teachers (Newman & Newman, 1979). Dorn et al (1988) found however, that the relationship between early maturation and positive feelings is not necessarily a linear one. Their study focused on the effects of pubertal status upon satisfaction with appearance and mood states. The found that physically mature girls were less satisfied with their appearance than less mature girls, whereas boys of the same physical state were more satisfied. "Mature" males also rated themselves as better on impulse controls and emotional tone in general than less mature boys (Dorn et al, 1988).

Researchers have even identified various body parts which are associated with better adjustment, peer relations and positive self image. Brooks-Gunn & Warren (1988), for example, have identified in a study of 9-11 year old girls that breast development was associated with increased peer status and body image. Rosenbaum (1979) argues that this is because breasts are the most obvious markers of maturing sexuality in girls and therefore signify a certain status among peers, parents and significant others. The more obvious manifestations of female physical maturation, whilst seen in a positive light by peers, is viewed by parents with concern (Katz, 1979, Brooks-Gunn & Mathews, 1979).

Most research focusing on pubertal development gives support to the Mediated Effects Model i.e., that there is a continuous interaction between

the adolescent and his/her environment which indirectly relates to the physiological concomitants of puberty. For adolescence it appears that external pubertal changes evident to others (which in turn are due to internal biological processes), are most likely to have an effect upon psychological functioning. Furthermore, the results of Tanner (1975), Lerner (1985), Dorn et al (1988) Susman et al 1988 and Brooks-Gunn & Warren's (1988) research has direct implications for emotional development, because emotions are invariably entwined in social interactions and processes (Izard, 1984).

3-2 EMOTIONAL VARIABILITY IN ADOLESCENCE

Empirical evidence suggests that adolescents are rather emotional creatures. Research indicates that adolescent emotions vary due to age and/or pubertal changes as well as gender factors. Larson, Csikszentmihalyi and Graef (1980) present evidence that adolescents experience wider emotional variability and more mildly negative affect in general, when compared with adults. They studied a group of 182 people, 75 of which were high school age (the remaining 107 were considered to be adults). Subjects were signalled at random times of the day to fill in a self report questionnaire on current emotionality. The results indicated that on average adults experience more positive mood states and felt more active and alert overall. Adolescents were more prone than adults to experiencing wider mood variation both positive and negative.

The increased frequency of mild depressive mood in adolescence has been noted in other studies. Kandel & Davies (1982) found in an epidemeological study of depressive feelings in adolescent, that 19.7% of the

adolescents reported being "very much" bothered about feeling sad or depressed in the past year as compared with 6.5% of their parents. Larson, Richards, Jewell, Raffaelli & Ham (1990) also note an increased frequency of depressive feelings with age (10-15 years).

Changes in frequency have also been associated with gender. Sex differences in the experienced frequency of depressive feeling for sub-clinical populations have also been well-documented, with females more commonly experiencing mild depressive feelings upon reaching puberty (e.g., Nolen-Hoeksema, 1987, Friedrich & Reems, 1988, Stapley & Haviland, 1989).

Larson et al (1980) also examined the duration of mood states for adolescents and adults. It seems that adolescent moods disappear more quickly and are less stable overall than adults. On average, adolescent negative moods diminish within 30 minutes whereas adult moods may last 2 hours or longer.

Despite these promising findings, Larson et al's (1980) study presents some methodological problems. They sampled a large range of people but categorised them only as adults (19-65 years) or adolescents (all high school classes). Therefore differences in physical development for the adolescents, as discussed in the previous section, and differences in" life stage" for the adults may have been confounding factors in this study.

Similar problems exist in Larson & Lampman-Petraitis's (1989) study focusing on the daily emotion states of children and adolescence. Here grade level was the only independent variable used for classifying adolescents and children. These researchers examined changes in frequency and the direction of general emotional lability from childhood to adolescence. Overall they failed to find evidence regarding changes in the frequency of

emotion with age. This finding is in contrast to other study findings however (e.g., Rutter, 1976, McCauley, 1988) which have found changes in the frequency of emotions with development and may possibly have been the result of using grade level as an independent variable. Although the overall frequency of emotions remained unchanged in Larson et al's (1989) study they did identify a change in the type of emotion experienced with age. Older adolescents reported less often experiencing extreme positive emotions and more often mild negative emotion.

3-3 RESEARCH ON DEPRESSIVE MOOD IN ADOLESCENCE

The prevalence of clinical level depression in adolescence is estimated to be approximately 4.7% (Kashani et al, 1989). Unlike adulthood, major depression (especially the endogeous type) is not considered a prominent psychiatric disorder in adolescence (Kashani et al 1989). Various controversies exist regarding the differential existence, classification and phenomenology of clinical levels of adolescent depression (e.g., Siegal & Griffin, 1984, Mitchell et al, 1988, McCauley et al, 1988). It is not the intention here, however, to discuss these in depth but merely comment on the uncertainty of the depression syndrome in adolescence. This uncertainly is reflected in research with some studies ignoring adolescence by collapsing this group into child or adult groups for the purposes of studying differences between childhood and adult depression (e.g., Izard & Schwartz, 1986).

Regardless or irrespective of the controversy surrounding clinically significant levels of adolescent depression, there is increasing empirical evidence which suggests that at sub-clinical levels, there are varying differences in the elicitors, coping behaviours and emotions experienced

between adolescents, children and adults (Inamdar, Siomopoulos, Osborn, & Bianchi, 1979, Kandel & Davies, 1982, Lewis, Siegal & Lewis, 1984, Kashani , Carlson, Beck, Hoeper, Cororan, McAllister, Fallahi, Rosenberg & Reid, 1987).

Elicitors of Depressive Mood in Adolescence

The empirical evidence suggests that most elicitors of depressive feelings in adolescence relate to significant others at this life stage. Issues with parents (Inamdar et al, 1979, Kandel & Davis, 1982, Lewis et al, 1984), school problems (Larson et al , 1980, Kashani et al, 1989) peer orientation (Larson et al, 1980, Kandel & Davies, 1982) heterosexual interest (Larson et al, 1980) and thoughts about ones appearance (Larson et al, 1980) are the most apparent in the literature.

It seems that for younger children (6-12 years) issues to do with parents are the most likely sources of distress (Lewis et al, 1984). Lewis et al (1984) found that sources of distress at this age relate to desiring greater proximity and closeness to parents. However with ongoing pubertal maturation the emotional distance increases between adolescence and their parents (Steinberg, 1987).

Sex differences have been reported in adolescent distress related to parental issues. Parental-related depressive feelings have been identified as more common for females than for male adolescents (Kandel & Davis, 1982). Steinberg (1987) argues however that these differences may relate to the type of pubertal process measures highlighted. In a survey of families and the effects of pubertal timing and status, Steinberg (1987) found that early maturation for males was associated with a higher level of adolescent-mother conflict. Pubertal timing was not found to be a significant factor for

females however but the onset of physical maturity was. Overall females recorded a greater level of conflict and this coincided with pubertal onset irregardless of maturational timing.

School experiences have frequently been associated with depressive feelings (e.g., Carlson & Cantwell, 1979, Larson et al, 1980, Lewis et al, 1984) Concerns about school and homework were the next most common stressors after parental issues in Lewis et al's (1984) study of preadolescents. Larson et al's (1980) had similar results for adolescents, however school issues was found to be less important than peer orientation at this stage.

The increasing importance of peer orientation factors to depressive mood in adolescent development has been highlighted in several studies. In Lewis et al's (1984) study of distress in preadolescence, peer association was a low ranking item as a cause of psychological distress. For adolescents however certain peer factors have had a high association with increased depression levels. Larson et al (1980) found that adolescents who were leaders in peer organisations and who experienced less peer alienation had more positive mood levels. Isolation from peers along with lack of closeness to parents were identified as the two main factors associated with depressive mood in Kandel & Davie's (1982) study. These researchers suggest that the adolescent needs to strike a delicate balance between increasing activity with peers, but at the same time, remaining close to their parents (Kandel & Davies, 1982). Research which has focused on this delicate balance between parents and peers has found that adolescents are equally involved with parents and peers on a temporal basis, but spend different types of time with the two groups (Montemayor, 1982). Montemayor (1982) found that time spent with parents increasingly became more functional, e.g., household

activities, eating , discussing future careers etc., whereas time spent with peers became increasingly associated with entertainment, playing sports and talking socially.

Some sex differences were observed in parent/ peer relationships in Montemayor's (1982) study. Both females and males spent less time with parents as age increased, however only females spent more time with peers. Montemayor (1982) relates the difference in time spent to different gender identity orientations. For males, their identity is based on instrumental competition and thus the pursuit of these goals means that males spend an increasing amount of time engaged in sports, work and school activities. Females, according to Montemayor (1982), base their identity on interpersonal competence, which is more appropriately achieved through communication with ones peers than with parents at this stage.

Research indicates that concerns related to the self (principally physical appearance) and the opposite sex become increasingly more salient with development. Lewis et al (1984) found for preadolescents, that concerns associated with physical appearance was not a frequent cause of distress. From a hierarchical ranking of twenty items, in Lewis et al's (1984) study, the two statements related to physical appearance ranked twelfth and fifteenth.

As well as increased saliency, Larson et al (1980) found that adolescents who spent a considerable amount of time thinking about themselves (principally their appearance) and about the opposite sex tended to experience wider mood variability and greater negative mood frequency. These factors have been reported as especially important in relation to female's experience of adolescent depression (Allgood-Merten, Lewinsohn &

Hops, 1990). A study of sex differences focusing on 13 to 18 year olds, reports that females were significantly less satisfied than males with their body appearance on three measures of body image, i.e., Offer Self-Image Questionnaire, Body Image Subscale; The Body Parts Satisfaction Scale and the Body-Self Relation Questionnaire (Allgood-Merten et al, 1990). Body image, especially for females, was found to be directly related to self-esteem and depression for this age group. Allgood-Merten et al (1990) argue that body image functions as a direct antecedent of depressive symptoms in adolescence and is a component of the depression construct at this age. They support this notion by arguing that in their study, the shared variance of body image variables with depression was eliminated when self-esteem is controlled for. Other studies focusing on sex differences in adolescent depression have had similar results. Stehouwer, Bultsma & Blackford (1985) suggest that the higher association of physical self-concept and depression in females may indicate a more external-interpersonal focus in depressive feelings for this group. Baron and Joly (1988) however, view these findings somewhat differently. They argue that rather than an internal external dichotomy for females and males, there are differences in the type of external focus explored. They suggest that the adolescent female's external focus in depression is characterised by bodily concerns while the male external focus is characterised by performance concerns (e.g., work inhibition) (Baron & Joly, 1988).

Adolescent Coping Behaviours Associated with Depressive Feelings

In general New Zealand adolescents follow trends and activities apparent elsewhere in the western world. Sports play a major part in New

Zealand male lives (56%) and to a lesser extent female lives (37%) (Ritchie & Ritchie, 1984). Interest in sport declines for both sexes over the adolescent period from early adolescence (10-14 years) to later adolescence (15 to 19 years). Males, in contrast to females, tend to "take up" other leisure activities (outdoor pursuits, wheels etc.) during this time . New Zealand females on the other hand become more occupied with household activities and "hanging out" at home in general. (Ritchie & Ritchie, 1984).

The differences in overall behaviours associated with gender and development are also reflected in the types of coping strategies used when in a negative emotional state. Patterson & McCubbin (1987) examined adolescent coping styles and behaviours associated with the "stresses" of adolescence in a groups of thirty 14 to 17 year olds. This was one of three studies Patterson & McCubbin (1987) conducted as part of the development of A-COPE, a coping behaviour schedule. They found that the most commonly used coping pattern overall was labelled "relaxing" (e.g., listening to music). Other studies support this findings, for example, Kurdek (1987) found the most frequently used coping strategies in their study were watching TV and listening to music . These were seen as having a positive stress-reducing function for adolescents. The next most common coping strategies Patterson & McCubbin (1987) found, were in descending order, developing self reliance, using direct action to solve problems, investing in close friends, seeking spiritual support, doing physical activities, seeking professional support, turning to family members and lastly ventilation of feelings (e.g., yelling blaming and swearing). From these results Patterson & McCubbin (1987) differentiated four patterns of coping , i.e., ventilating feelings, seeking diversions, avoiding problems and relaxing. They argue that many of the

behaviours, especially those associated with ventilating feelings and avoiding problems are normatively evaluated as undesirable in our society.

Sex differences in coping strategies found in Patterson & McCubbin's (1987) study, reflect the findings of many studies on adolescent depressive behaviour and coping. Overall girls tend to use a broader range of coping and interpersonal strategies. Females were more likely to target friends, siblings, parents and other adults as a way of coping. Patterson & McCubbin (1987) argue that their findings are consistent with women's greater use of social supports as a" buffer" against stressors. Some evidence suggests however, that it may not be social supports per se that are important to women but the type of relationships they have with those social supports. Hortacsu (1989), in examining targets of communication during adolescence, found that females tend to interact in dyads more often and males interact in larger groups where other activities are performed. Differences were also found in the types of interactions males and females engaged in. According to Hortacsu (1989) females tended to self-disclose more often than males. This finding may have been an artifact of the previous finding however , i.e., people tend to disclose more in dyad situations than in larger groups (Deaux & Wrightsman, 1984).

Kurdek (1987), in a study focusing on coping behaviour and symptomatology in adolescence, found differences between males and females for items associated with humour and physical activity. Males were significantly more likely to engage in these activities, while girls were more likely than boys to listen to music and talk to a friend about feelings (Kurdek, 1987).

Differences in coping strategies due to age factors were also examined

in Kurdek's (1987) study. Older adolescents (approx. 14 yrs) were more likely than younger adolescents (approx. 12 yrs) to try to be humourous, watch T.V. and adopt a physical activity. With regard to the coping classifications, older adolescents more frequently used coping behaviours classified as substance use. Kurdek (1987) reports for females, there was an age related trend towards more negative coping strategies for older adolescents, i.e., more frequent use of ventilation and less use of agency and social support. This was not apparent for males.

In relation to symptomatology, for males, Kurdek (1987) found a significant correlation between depressive symptoms and ventilation coping strategies (e.g., getting angry, blaming others, cry, let off steam etc.). Significant correlations were also found between depressive symptoms and ventilation for females, however these symptoms also correlated with other coping strategies. For females, behaviours clustered under substance use (e.g., drinking alcohol, smoking, , staying away from home, swearing) and social supports (e.g., talk to a family member, talk to a parent, prey etc.) were also significantly associated with depressive symptoms (Kurdek, 1987).

Larson et al (1990) have also found a significant difference in the daily behaviours of adolescents who are considered to have depressive tendencies and those who do not. They found that "depressed" subjects spent significantly less time in public and more time in their bedrooms. They also perceived family members as less friendly and more often wanted to be alone when they were with family. For "depressed" males, much less time was spent with friends of the same sex than males who were not depressed, however both groups spent equal time thinking about friends. Larson et al (1990) suggests that these results give support to the notion that, for males,

expression of depressive feelings may be unacceptable to peers and therefore potentially more alienating.

Emotional Patterns in Depressive States

The use of emotion as a specific variable in depression research, has until recently been neglected. More current investigations into the experience of emotion indicate that depressive states involve complex patterns of emotions (Izard, 1985, Blumberg & Izard, 1986, Labouvie-Vief, Larson, DeVoe & Schoeberlin, 1989, Stapley & Haviland, 1989). Studies examining depressive emotional states in children, adolescent, and adult subjects have noted age and gender differences in the pattern of emotions experienced. Labouvie-Vief et al (1989) found in their life-span study looking at three age groups from adolescents (11-19 years) to young adults (19-45 years) and older adults (46-67 years), that age and gender changes in emotional experience were apparent for anger and sadness. For anger, a lack of maturity involved an overpolarization of self and other, with blame and responsibility for conflict ascribed solely to others. More mature adults were better able to accept responsibility for conflict and self blame. In contrast to this "immature" sadness was often characterised by an overempathic response to the sadness of others. Labouvie-Vief et al (1989) suggests that the lack of differentiation between self and other for sadness, improves with emotional and cognitive maturity.

Izard (1974) has developed an specific instrument for measuring the subjective-experience component of emotion which is based on his Differential Emotions Theory discussed earlier. The instrument gives a profile of emotions specific to a particular situation, e.g., hostility, anxiety or

depression. Each pattern has a dominant emotion. For adult depression, Izard (1974) found that distress (including feelings of sadness, downheartedness and discouragement) was the key emotion both in terms of the intensity and frequency of experienced emotion.

Izard, Dougherty, Bloxom and Kotsch's (1974) DES instrument has been used in many forms to compare emotions experienced in both children and adults. In a comparison study focusing on depressive emotional patterns, Izard & Schwartz (1986) found that adult's most dominant emotions were in order sadness, anger and guilt, whereas for children, anger was the most prominent emotion experienced. Other studies on childhood depressive states have confirmed these findings (e.g., Blumberg & Izard, 1986). The DES depression hierarchy found in Blumberg and Izard's (1986) study of 10-11 year olds, was in decreasing order: anger, sadness, self-directed hostility, shame, anger, fear, guilt, shyness, disgust, contempt, interest, joy and surprise. According to Blumberg & Izard (1986), the finding that anger has the highest mean of any emotion in the hierarchy of depression for children, provides some understanding towards the clinically observed behaviours of child who are depressed, e.g.., acting out behaviours. Despite these findings, no studies to date have focused specifically on adolescent emotional patterns and compared them with either childhood and/or adulthood.

Gender differences have also been noted in DES emotional patterns for depression (Izard & Schwartz, 1986, Stapley & Haviland, 1989). According to Izard & Schwartz (1986) research indicates that female children tend to have emotional profiles more similar to adults, than males. Girls also tend to report experiencing more joy and shame when feeling depressed.

For adolescents, Stapley and Haviland (1989) found that inner directed negative affects were more frequently associated with depression for females. Using the DES they found general gender differences in reported emotions experienced. For males the most salient emotion was contempt. Males less frequently reported experiencing surprise, sadness, guilt and disgust. Females, in contrast, reported a number of equally salient emotions i.e., surprise, shame, guilt, sadness and self-directed hostility. Not all emotions measured however highlighted gender differences. No gender differences were found for joy, interest, anger or disgust. Stapley & Haviland (1989) suggest from their findings that for males especially, the reporting of emotions experienced may be influenced by role expectations. Taking this one step further their research suggests that the difference in emotional salience for gender, may be due to differences in the social understanding and interpretation of the emotional label. For example, Stapley and Haviland (1989) found that surprise differed significantly in its meaning for males and females. For males, it was associated with negative emotional states, whereas for females surprise was associated with positive states.

3-4 SUMMARY AND CONCLUSIONS

Overall there appears to be a general definitional confusion over the term "adolescence" for researchers to date, with a lack of definitional homogeneity in studies. Until a clear definition is accepted for adolescent research, this issue will continue to weaken the existing data base. Age is the most common and often only marker used in examining adolescence. However, age is a chronological measure and used by itself can not

accurately reflect the wide range of developmental and gender differences apparent in this period.

Research focusing on pubertal criteria as a marker for adolescence suggests that the effects of the physiological changes (both direct and indirect) on the adolescent and their influence on how significant others perceive that individual, are of prime importance to emotional development and functioning. Various pubertal factors, e.g., early versus late maturation during adolescence, have been empirically linked to changes in negative emotional states.

In terms of overall variability of emotion, studies indicate that differences may exist in the frequency and duration of emotions experienced between children, adolescents and adults. Of the few studies available, most indicate that there is an increased frequency of mild depressive moods in adolescence, when compared with children and adults. It seems that these moods, although more frequent, do not last as long for adolescents as those experienced by adults. Unfortunately methodological problems and the small number of investigations make these results tentative only.

Research on mild everyday depressive mood in adolescence, indicates that the main elicitors of such mood are issues to do with parents, school problems, peer orientation, heterosexual interest and appearance concerns. Differences in the salience of these factors with ongoing development and gender have been observed. These differences in general reflect adolescent societal and sex role expectations. Specifically the adolescent's need for greater individuation from the family of origin and increased involvement with peers. For females, there is an increased concern with themselves and their physical appearance whereas for males, performance directed tasks and

activities requiring more independence, increasingly influence emotions.

Age and gender differences have also been noted in coping behaviours associated with depressive feelings for adolescence. Recreational pursuits, e.g., listening to music and watching T.V., have been found to be the most commonly used coping strategies in studies surveyed. Other studies of depressed vs. non depressed adolescents indicate that withdrawal behaviour (from peers and family) is common for depressed individuals. Overall, research suggests that females tend to use a broader range of coping strategies and more dyadic interpersonal coping. Males tend to engage in more physical activity and humour when feeling "depressed". With increasing age, studies have found an increase in socially defined negative coping strategies, particularly for females, i.e., more ventilation of feelings and substance abuse.

Research focusing on subjective emotion patterns has found trends indicating age and sex differences in the experience of "depression" which perhaps reflect the differing levels of activity. For children, anger appears to be the most prominent emotion in depression whereas for adults sadness is the key emotion. Emotion profiles, as measured by the DES, indicate that female children tend to approximate adult emotion patterns more closely than males. Only one study reviewed has looked specifically at adolescent emotion profiles and this study focused on gender differences. Specifically, differences were found in the reporting of various emotions. Females tended to more commonly report surprise, shame, guilt, sadness and self directed hostility and males more often reported contempt. The authors speculate that males may be more conforming with regard to reporting emotions and sex role expectations. However, the emotional meaning of

each label may differ between the sexes and therefore it may not be that males are more conforming but have a different understanding of each emotion. This hypothesis is partially supported (but not discussed) by the finding in Stapley & Haviland's (1989) study, that surprise is viewed in a positive context for females but negative context for males.

3-5 RATIONALE FOR THE CURRENT STUDY

1/ AIMS OF THE CURRENT STUDY

The dearth of research available on adolescent emotion in general and specifically everyday feelings, has meant that research and models of "normal" adolescent development (including feelings) have been extrapolated to a large extent from studies of various psychopathologies (Offer et al, 1982). The purpose of this study, therefore, is to extend the existing small knowledge base on "normal" everyday negative mood in adolescence into an area not previously examined, i.e., feeling "fed-up". Gathering more knowledge on everyday "normal" adolescent mood, will aid researchers and clinicians in the future, by providing better reference points from which they can judge the relative status of adolescents in relation to normative development as well as psychopathologies.

Rationale for selecting a particular adjective to study emotion

Earlier theoretical discussion (Piaget, 1969, Cicchetti & Hesse, 1983, Wadsworth, 1984, Izard & Malatesta, 1984, Weiner & Graham, 1985, Kagan, 1985) emphasised the importance of cognitive development in relation to the child's increased ability to symbolise and abstractly represent emotions. Studies indicate that linguistic symbolism (as well as other forms such as

facial) becomes increasingly more salient in the communication of emotional states with development (Weiner & Graham, 1985, Schwartz & Trabasso, 1985). Although young children (3 years olds) are capable of some simple linguistic emotional understanding (e.g., Davitz, 1969) they differ from their older counterparts in that older children and adolescents are better able to understand and adapt to more subtle, specific and culturally defined emotional language (Izard & Malatesta, 1984, Schwartz & Trabasso, 1985).

The term "fed-up" was chosen because non scientific observations obtained through speech and written media indicate that this adjective is often used to describe a certain type of everyday negative feeling in New Zealand (and possibly other English speaking countries, e.g., England, U.S.A., & Australia, if language used on television programmes and overseas advertising is indicative of the majority).

Rationale for the Selection of Variables to be Studied

The Frequency of Feeling "Fed-up" Both theory and previous research have indicated that self referent negative feelings are more common or frequent in adolescence (e.g., Hall, 1904, Rutter 1976, Larson et al, 1980, Kandel & Davies, 1982, Izard & Malatesta, 1984, Larson & Lampman-Petraitis, 1989). Various theoretical causes have been attributed to this increase based on either biological/adaptive (e.g., Freud, 1938, Campos & Barrett, 1985, Izard, 1986) or cognitive arguments (e.g., Piaget, 1969, Kagan, 1985). It is difficult to draw any firm conclusions based on the existing empirical work however, because there are very few studies which have addressed the issue of developmental differences in frequency of everyday

negative emotion and those that have (e.g., Larson et al 1980, Susman et al, 1985, Larson & Lampman-Petraitis, 1989) are lacking in their homogeneity regarding an operational definition of adolescence (e.g., using school grades, biological hormones, age etc.). No study to date has examined frequency changes of emotion *within* the adolescent period. This study proposes to address the question of frequency changes in feeling "fed-up" between late childhood and within early-middle adolescence associated with cognitive (age) vs. pubertal development. The involvement of gender and cultural determinants will also be addressed, as no previous investigators have focused on these issues in relation to this topic, despite some evidence from the literature (e.g., Izard, & Schwartz, 1986, Allgood-Merten, Lewinsohn & Hops, 1990) that gender differences exist in depression.

The Duration of Feeling "Fed-up"

Postulate 9 within Izard & Malatesta's (1984) theory of emotional development addresses the issue concerning duration of emotion and points to the involvement of biological components (hormones and neurotransmitters) in concert with cognitive processes. Although adolescence is not specifically addressed in this postulate, it seems likely that the extreme pubertal hormonal changes during this time will directly or indirectly influence the duration of emotional feeling in some way. The empirical evidence available confirms that the duration of adolescent states differ from adult experiences by being shorter in duration (e.g., Larson et al, 1980). Within adolescent measures have not been addressed however. This study therefore proposes to address the question of duration relating to feeling "fed-up", examining any differences due to physical/pubertal

development as well as age/ cognitive factors. It is intended that gender and cultural factors will also be addressed, as these have been empirically linked to adolescent emotional experience (e.g., Petersen, 1983, Dubek, 1987).

The Antecedents of Feeling "Fed-up"

According to Izard & Malatesta (1984) the ability to label ones own internal states from external social cues is an important part of more advanced development as it lead to the ability of the individual to transact with their environment.

The importance of more broadly based social experiences and increased cognitive abilities in adolescence, leads them to confront and reevaluate existing knowledge and beliefs. According to Kagan (1985), this causes inevitable intrapersonal and interpersonal conflict which elicits negative feelings such as hopelessness and depression.

Empirical evidence, appears to support the cognitive/socially adaptive theory adopted by (Erikson, 1963, Izard & Malatesta, 1984, Izard, 1986, Richards & Petersen, 1987) and indicates that the main causes of conflict leading to depressive type feelings in adolescence are factors which are consistent with societal and sex role expectations of this period. The most prominent being parents, peers, school, opposite sex and physical concerns relating to the self (e.g., Lewis et al, 1984, Steinberg, 1987).

It is proposed that a similar pattern of results regarding causal mechanisms, might be expected in this study if "feeling fed-up" is found to be a depressive everyday mood.

Coping Behaviours When Feeling Fed-up"

Izard (1984) argues that different emotions motivate different behavioural alternatives. According to Izard & Malatesta (1984), these behaviours reflect socially and culturally defined adaptive ways. Behaviours motivated by depressive states therefore should reflect that state within the bounds of social and gender expectations. Research findings discussed confirm this notion. In general, recreational coping strategies reflecting adolescent interests were commonly cited (e.g., listening to music). Social withdrawal was also a prominent feature of adolescent coping. (Patterson & McCubbin, 1987, Kurdek, 1987) Differences were found to exist in the type and range of coping strategies for age and gender. Given these findings, one would expect that if feeling "fed-up" is similar to the depressive states discussed in the research, then it will motivate socially defined coping strategies akin to those found previously.

The Pattern of Emotions in Feeling "Fed-up"

There are two purposes in examining the patterns of emotion present when adolescents feel "fed-up". Firstly, the patterns will help to confirm or disconfirm the nature of this state, i.e., whether it really is a mild form of depression or something quite different. If feeling "fed-up" follows a similar pattern to depression, then further support may be given to the Meyerian theoretical viewpoint that "normal" everyday depression and "abnormal" depression are similar in emotional nature but differ in severity, i.e., intensity and frequency (Akiskal 1983, Kendall, 1986). Secondly, no previous investigators have focused specifically on adolescent emotional patterns and the possible differences associated with these patterns due to

physical/pubertal and cognitive development. Although gender differences in the pattern of emotions during adolescence have previously been recorded (i.e., Stapley & Haviland, 1989), no studies have specifically addressed the pattern of emotions associated with a negative state in this group.

2/ RESEARCH METHOD RATIONALE

The subjective-experiential self-report method of collecting data selected for this study, is one of three basic approaches used in the empirical study of emotion . The other two concern the measurement of various physiological responses and overt behaviours (Strongman, 1987). Self-report instruments have been used quite extensively in contempory studies of adolescent emotion, however this method is not without its problems and controversies. Critics of subjective type methods argue that there is a need for greater quantitative structure and standardisation of this approach if a more accurate and larger data base is to be achieved (e.g., Woelfel & Napoli, 1984). Nevertheless completely eliminating subjective methodology would in one sense be defeating the purpose of studying emotion if Izard's (1977) concept of emotion is adopted. According to Izard (1977) subjective-feeling components are an integral part of the emotion system.

Attempts have been made to "tighten up" subjective measures , for example by using structured questionnaire formats rather than unstructured verbal reports (Blank, 1982). Whilst empirically standardised instruments in the study of emotion are desirable and indeed are continually being refined, they have certain limitations in exploratory work. In the case of this study, the state under investigation, i.e., feeling "fed-up", does not appear as the

subject in any standardised instruments, simply because it has not been researched previously. Therefore the self report questionnaire used in the current study was devised , or in the case of the DES, modified by the author to fit the current application. In this regard the results can be considered as indicative only but providing initial directions for further research.

The two other methods used to study emotion were considered unsuitable for this present endeavour. Firstly, the economical constraints and logistical task of organising and measuring 259 subjects physiological emotional responses would have been inconceivable given the temporal constraints on this work. Also, because no previous data were available regarding eliciting antecedents prior to the conduction of this study, it would have been extremely difficult to elicit the desirable response in a laboratory situation. Strongman (1987) suggests that even with powerful intense stimuli, it is difficult to evoke a naturalistic response, as subjects' responses are tempered by the situation.

Focusing on subject's overt behaviour would be equally problematic logistically . Several setting would need to be sampled in order to obtain a representative data record. The intrusion of the researcher/observer either in the laboratory or naturalistic setting may also be a problem as research indicates that observer presence effects the dynamics of social behaviours and events (Deaux & Wrightsman, 1984).

Furthermore neither of these approaches can directly and simply measure the personal experience of feeling "fed-up" and how the individual perceives this state.

Therefore acknowledging the above reasons, it was decided that the self-report questionnaire method was the most appropriate for this

exploratory study.

3-6. QUESTIONS ADDRESSED IN THE CURRENT STUDY

Questions Associated with Frequency

1. How frequently do adolescents feel "fed-up"?
2. Is there an increase in the frequency of feeling "fed-up" upon entering adolescence (as defined by pubertal status or age?). If not, are any changes observed?
3. What influence, if any, does gender and culture, i.e., race, have on the frequency of feeling "fed-up"?

Questions Associated with Duration

4. What is the experienced duration of feeling "fed-up" in adolescence?
5. Are there changes in the duration of feeling "fed-up"due to developmental factors (i.e., pubertal status or age)? If changes do occur what direction do they take?
6. Do socialisation factors, i.e., gender and race effect the duration of feeling "fed-up"?

Questions Regarding Antecedents

7. What are the variable cues or antecedents associated with feeling "fed-up" in adolescence and in what way do they reflect social/cultural living patterns at this time?
8. Are there differences in the salience of antecedents named due to developmental (puberty & age) and social (gender & race) factors?

Questions Addressing Coping Behaviours

9. Does feeling "fed-up" act as a motivator of behaviour and if so, what are the coping behaviours associated with feeling "fed-up"?

10.Do developmental (puberty & age) and social (gender & race) factors affect the types of behaviours engaged in?

Questions Addressing Emotional Patterns

11. What emotional patterns are involved in feeling "fed-up"?

12. Do emotional profiles change upon entering adolescence (i.e., pubertal status or age)?

13. Are there gender or cultural differences in emotion profiles?

CHAPTER TWO

METHOD

1. SUBJECTS

1-1. SUBJECT SELECTION

A cross-sectional design was employed in this study to investigate the mood/state " fed-up". The subjects were recruited from two state integrated primary and two state secondary schools in the Christchurch area. Self-report questionnaires (Appendix A) were distributed to Standard Four through to Form Four pupils. Two classes of each level were targeted.

A total of 264 questionnaires were returned, however 25 were eliminated because subjects either violated the age criteria (subjects had to be between 10.6 years and 15 years of age), or failed to complete a significant portion of the questionnaire (over 75% of the form) or reported that they were unfamiliar with the term "fed-up". 239 questionnaires were retained for analyses.

1-2. SUBJECT CHARACTERISTICS

The number of subject respondents for each age category (broken into six monthly intervals) ranged from 16 to 30. Overall there was a fairly even balance in the distribution of subjects in the various age groups with no skewing effects evident (Table 1).

As no effort was made to balance for sex slightly more males (126) than females (111) made up the total sample (Table 1). Males made up a

large proportion of responders in the 11.5 years and 12.5 years age categories (Table 1).

Roughly half of the subjects had reached puberty (for the purposes of this study puberty was defined by the presence of axillary hair development under the arm (Table 1)). As would be expected with increasing age fewer subject classified themselves as prepubertal and more as pubertal (Table 1).

TABLE 1. Subject's Characteristics by Sex, Pubertal Status and Age

AGE	TOTAL RESPONSES PER AGE GROUP	SEX		PUBERTAL STATUS	
		males	females	prepubertal	pubertal
10.5	30	14	15	21	9
11.0	28	13	15	22	5
11.5	16	11	4	16	0
12.0	30	14	16	17	13
12.5	24	18	6	17	7
13.0	16	7	9	5	10
13.5	27	15	12	9	15
14.0	17	8	9	1	13
14.5	28	15	13	2	25
15.0	23	11	12	2	21
TOTALS	**239**	**126**	**111**	**112**	**118**

Table 2 demonstrates that the overwhelming majority of subjects considered themselves to be European or Pakaha (203). Only a small proportion recorded themselves as Maori, Pacific Islanders or belonging to some other ethic group. Because of the large imbalance of subject numbers in the ethnicity groups, this variable was not analysized further.

TABLE 2. Ethnic Characteristics of Subjects

	Ethnicity			
	European	Maori	Pacific Islander	Other
TOTAL NUMBER OF RESPONSES	203	14	3	14

2. DATA COLLECTION

2-1. QUESTIONNAIRE CONSTRUCTION

The self-report questionnaire distributed to subjects (Appendix A) was developed to test the questions formulated from the related literature discussed in Chapter One. There were two parts to the questionnaire. The aim of the first section was to collect personal data relating to the age, sex and ethnicity of subjects as well as the level of physical/pubertal development (as measured by axillary hair development). Axillary hair was selected as the pubertal variable for two reasons. Firstly, it was thought that the presence or absence of secondary hair growth in the armpit was a fairly discreet measure of pubertal status and thus would not unduly embarrass subjects. Secondly, it was a relatively simple measure easily identified by subjects. Although only one measure of puberty was used , in nearly all cases the growth of axillary hair coincides with other secondary sexual characteristics as they become obvious to others, e.g., the development of breasts in females and facial/body hair in males (Tanner, 1975 Newman & Newman, 1979). As well as being biologically important this transition is seen as important from a socio-emotional interactional viewpoint.

The remaining five questions in the first section of the questionnaire were directly related to the state under investigation, i.e., feeling" fed-up".

The first of these addressed the subject's familiarity with the term "fed-up" as it was necessary to establish this before subjects could move on to questions relating to the frequency and duration of the "fed-up" state as well as the causal antecedents and behaviours associated with feeling fed-up. The questions which related to causal antecedents and behaviours were open-ended response items. This was considered necessary because no previous investigators have focused specifically on feeling "fed-up" and therefore the knowledge base is not sufficient to offer "response choice" type questions. Also, as this was an exploratory study it was thought that open-ended questions would yield more information despite the difficulties in analyses they occasion.

The aim of the second section of the questionnaire was to measure and quantify the common emotions subjectively experienced when feeling "fed-up". Two forms of the Differential Emotions Scale (DES) exist, i.e., an intensity and frequency scale (Izard et al, 1974). The frequency form was chosen because DES research conducted by Izard & Schwartz (1986) indicates that those who are clinically depressed experience more intensity of feeling than those who are not clinically depressed, but essentially hold the same frequency profile. As the intention of this study is to explore the most common emotions associated with a normal everyday "mild" state and not to make a differential diagnosis, (although in any sample of individuals there will be a few who are clinically depressed) the DES selected reflects this intention. Furthermore studies examining the association between the two scales when given to a group of "normal" adolescents, e.g., Stapley & Haviland (1989), have found very high correlations (ranging from .79 to .90).

The trial use of Izard et al's (1974) Differential Emotions Scale II on a

small pilot group (n=5), indicated that this instrument was too sophisticated for the younger subjects in the targeted age group. A more suitable form of this scale (DES IV) intended specifically for children and adolescents was acquired. The DES IV (like all other forms of the DES) is a Likert-type scale which consists of 36 statements which divide into 12 emotion scales, i.e., anger, joy, interest, surprise, distress, disgust, contempt fear, shyness, guilt, hostility and shame. The construct validity of the DES for children and adolescents has been examined by Kotch, Gerbing and Schwartz (1982). They found that this scale was suitable for a wide age range (8-17 yrs) and essentially appeared to measure the same emotions as the original DES 1 and II for adults.

The final version of the second section in the questionnaire included a modified version of Izard's DES IV (Appendix A). Unlike the standard DES IV, the aim of this version was to focus specifically on one mood/state , i.e., feeling "fed-up" and measure the common emotions experienced within it. This was achieved by asking subjects to imagine a situation in which they felt "fed-up" as they answered the items (Appendix A). Studies have indicated that using the technique of visualising emotions produces essentially the same emotional profile of DES means as those in real experiential situations (Bartlett & Izard, 1972). Although visualising emotion techniques require a certain level of cognitive development (Yussen & Santrock, 1982) research into negative emotions with children suggests that by 11 years of age they are capable of using this technique (Ultee, Griffioen, and Schellekens, 1979).

Other modifications included a set of extra instructions and examples on how to complete the Scale. These were supplied because it was

anticipated that many subjects would not have seen a Likert-type questionnaire before. The instructions were similar to those used in Kotch et al (1982).

2-2. RESEARCH PROCEDURE

The subjects filled out the questionnaire as a group in their own classrooms under the supervision of the researcher. Subjects were asked to refrain from marking any answers until all instructions had been given and queries answered. The written instructions were read orally by the researcher with particular emphasis on assuring confidentiality and anonymity. It was also stressed that the questionnaire was not a test and that subjects needed to answer questions for themselves in order to minimise copying.

As the research was conducted in school time a maximum of three quarters of an hour per class was allowed. Nearly all subjects completed the questionnaire in this time. After the collection of questionnaires a further 5 minutes was set aside for subjects to comment and/or express any concerns regarding questionnaire contents.

Some items in the completed questionnaires required coding before analysis. Many simply required numerical assignment, e.g., the frequency and duration of feeling fed-up items were coded in temporal order. However the open-ended questions addressing causes and behaviours when feeling "fed-up" required more time and effort. These questions were each classified into 10 categories which had been developed prior to final coding by examining a random but representative sample of questionnaires (n=30).

The 10 categories which were developed for the causes of feeling fed-up were:

1/**Issues with Parents:** (e.g., family fights, nagging from parents parental relationship problems, etc.).

2/**Issues with Siblings:** (e.g., teasing, fights over rights and/or possessions, verbal and/or physical attacks from siblings,etc.)

3/**Issues with School:** (e.g., homework, teachers, boring or difficult work, etc.).

4/**Issues with Classmates/Peers:** (e.g., being teased, being left out,etc.)

5/**Having Nothing to do:**

6/**Failed Attempts:** (Failing to achieve personal expectations at academic, sports or work activities).

7/**Perceived Injustices:** (being blamed when innocent; from the subject's viewpoint).

8/**Opposite Sex:**

9/**Physical Complaints:** (e.g., having pimples, being too tall/short, being over/under weight etc.).

10/**Others:** (a "catch all" category with items ranging from general causes such as the weather, after school work, household chores etc., to things specific to the individual, e.g.,one boy reported feeling fed-up with people who don't like heavy metal!).

The 10 categories used to code behaviours when feeling fed-up were:

1/**To Hit or Use Some Other Physical Force on Somebody:** (e.g., friends, siblings, parents).

2/**To Hit or Use Some Other Physical Force on Something:** (e.g., hit a

pillow, slam doors, etc.).

3/**Verbal Abuse or Expression:** (e.g., screaming, yelling, swearing, etc.).

4/**Withdrawal Behaviour**: (e.g., go to another room, leave the house, refuse to talk).

5/**Cry:**

6/**Seek Entertainment:** (e.g., listen to music, read, watch T.V., play video games, etc.).

7/**Sport or Other Physical Activities:** (e.g., climb a tree, walking, jump on a trampoline ,etc.)

8/**Seeks External Substance Gratification:** (e.g., cigarettes, alcohol, food, drugs, etc.).

9/**Talk With Somebody:** (e.g., a friend, parent etc.).

10/**Other:** (a "catch all" category with both general and individual behaviours).

CHAPTER THREE

RESULTS

1. INTRODUCTION

The chapter begins with an outline of the statistical rationale and data analyses procedures followed. The results are then presented in three major sections. In the first section data relating to the frequency and duration of the " fed-up" state are presented. Here the results of the Mann-Whitney and Kruskal-Wallis statistics are reported. The second section deals descriptively with the results of the open-ended questions, i.e., the causes and behaviours when feeling "fed-up". The last section is concerned with the results obtained from performing analyses of variance and *t*--tests on the modified DES IV data.

2. DATA ANALYSES & STATISTICAL RATIONALE

The data from the 239 questionnaires were analysed by computer using the SPSSx software package. Various statistical techniques were used to provide descriptive and inferential statistics. There were three parts to the analysis of the data. The first section was concerned with analysing the data relating to the frequency and duration of feeling "fed-up". In order to determine the effects of the independent variables (age, sex, and pubertal status) for this section, Kruskal-Wallis and Mann-Whitney non parametric tests were used because the data violated the normal distribution

assumption needed to perform analysis of variance, i.e., the data did not follow the normal curve shape (Bruning & Kintz, 1987).

Only descriptive statistics were possible for the open ended questions, i.e., the causes and behaviours when feeling "fed-up". This is because multiple responses were recorded for each subject. Both analysis of variance and non parametric tests appropriate to use with these data require that each subject's observations be independent,.i.e., that there be only one record for a dependent variable.

The third section of analysis focused on examining what emotions are present when adolescents feel "fed-up". Raw scores and means were computed for the DES IV Scale. Analyses of variance and *t* - tests were performed to determine whether there were any significant differences in emotional patterns between the different ages, sexes and pubertal levels. When appropriate, age categories were condensed for ease of analysis.

3-1 THE FREQUENCY & DURATION OF FEELING FED-UP

The frequency data indicate that adolescents as a group feel "fed-up" on average a few times per week (coded frequency mean X=3.1). This is illustrated by examining the pattern of within subgroup responses shown in Table 3 (in parenthesis). In nearly all cases the highest percentage of responses were in the "few per week" category.

Analyses performed on the frequency data using Mann-Whitney and Kruskal-Wallis indicate that there are no significant between group differences in response patterns for sex, puberty or age (Table 3). Although no significant differences overall were found, an examination of between group

response percentages for each frequency category highlight a few interesting discrepancies. For the small percentage of those who most frequently became "fed-up", i.e., more than once a day, the majority had reached puberty (80%) and 60% were in the oldest age group (Table 3).

Overall the data on duration suggest that when adolescents feel "fed-up" it does not last long. On average feeling "fed-up" lasts less than half an hour (a coded mean of X=1.3) however the large standard deviation (S=2.1) for this data indicates a wide spread in responses. Changes in the within group duration response patterns (shown in parenthesis, Table 4), show a wider spread of responses to the various duration categories with onset of puberty and with increasing age.

Significant between group differences were found for pubertal status (axillary hair) $z == -2.544$, $p < .01$, suggesting that pre pubertal and pubertal groups do differ in the duration that they feel fed-up.

When comparing the prepubertal and pubertal between group percentages for each duration category clear differences in responses are evident with a larger percentage of pubertal subjects responding to the one hour , 1/2 day and day duration categories (Table 4). The prepubertal group have a higher percentage of responses for the less than half hour and more than a day categories. The latter category, however, has only small numbers (Table 4). Overall the data indicate that pubertal subjects become "fed-up" for a longer duration.

No significant differences in responses were found for sex or age (Table 4).

Table 3.

Frequency of Feeling Fed-up by Sex, Pubertal Status & Age

(% of between group responses per frequency category (column) & within group responses across categories (row (in parenthesis)

		> Once Per Day	Daily	Few per Wk.	Few per Mth.	Never	z (M-W)	Signf.
Sex	Male	60.0	51.7	54.2	50.6	100.0	-.320	.75
		(7.1)	(11.9)	(46.0)	(34.1)	(0.8)		(NS)
	Female	40.0	48.3	45.8	49.4	0.0		
		(5.4)	(12.6)	(44.1)	(37.8)	(0.0)		
Axillary Hair	Yes	80.0	62.1	42.2	53.0	100.0	-.814	.42
		(10.2)	(15.3)	(36.4)	(37.3)	(0.8)		(NS)
	No	20.0	37.9	57.8	47.0	0.0		
		(2.7)	(9.8)	(52.7)	(34.8)	(0.0)		
							X^2 (K-W)	Signf
Age Yrs	10.5-11.5	13.3	27.5	32.4	33.8	0.0	4.718	.09
		(2.2)	(10.7)	(50.4)	(36.7)	(0.0)		(NS)
	12.0-13.0	26.7	24.1	26.9	33.1	100.0		
		(4.7)	(10.3)	(42.2)	(41.7)	(1.1)		
	13.5-15.0	60.0	43.4	40.7	33.1	0.0		
		(9.8)	(14.2)	(46.5)	(29.5)	(0.0)		

Table 4.
Duration of Feeling Fed-up by Sex,Pubertal Status and Age

(% of between group responses per duration category (column) and within group responses across categories (row (*in parenthesis*))

		<1/2 hr.	1hr	1/2 Day	Day	> Day	*z* (M-W)	Signf
Sex	Male	57.1 (51.2)	52.6 (24.0)	45.7 (12.8)	45.0 (7.2)	60.0 (4.8)	-1.124	.26 (NS)
	Female	42.9 (44.0)	47.4 (24.8)	54.3 (17.4)	55.0 (10.1)	40.0 (3.7)		
Axillary Hair	Yes	41.5 (38.3)	55.2 (27.8)	61.8 (18.3)	78.9 (13.0)	30.0 (2.6)	-2.544	.01
	No	58.5 (55.4)	44.8 (23.2)	38.2 (11.6)	21.1 (3.6)	70.0 (6.3)		
							X^2 (K-W)	Signf
Age Yrs	10.5-11.5	34.8 (54.9)	31.0 (23.7)	27.8 (12.4)	30.0 (7.8)	10.0 (1.2)	12.14	.21 (NS)
	12.0 -13.0	33.9 (54.6)	27.2 (21.4)	30.5 (16.5)	15.0 (4.3)	20.0 (3.2)		
	13.5-15.0	31.3 (37.9)	41.4 (26.7)	41.8 (15.6)	55.0 (11.9)	70.0 (7.9)		

3-2. THE CAUSES OF FEELING FED-UP AND BEHAVIOURS ASSOCIATED WITH THIS STATE

In order to investigate thoroughly the phenomenon of feeling "fed-up" it was necessary to identify the variables which lead adolescents to feel this way. Table 5 shows the percentage of between group responses to each coding category as well as the actual frequency of responses for the three independent variables (sex, pubertal status & age). The data indicate that the most frequent category responses overall are issues with parents, issues with siblings and issues with school. Following these in decreasing frequency are issues with classmates or peers, physical complaints, others, failed attempts, perceived injustices, opposite sex and lastly, nothing to do (Table 5).

When comparing the response patterns for the two sexes, there is little difference between male and female response rates for issues with siblings and issues with schools however a much larger percentage of females (60.4%) than males (39.6%) had issues with parents (Table 5). The majority of those who cited having nothing to do as a cause for feeling "fed-up", were males (64.3%) , however there were only small numbers of responses to this category overall (Table 5). Females more often cited the opposite sex (76.2%) and physical complaints (69.4) as causes for feeling "fed-up" (Table 5).

Table 5 also indicates that some differences exist in response patterns between prepubertal and pubertal subjects. Although these differences were not large in percentage terms, more subjects who had reached puberty cited issues with parents and issues with schools as reasons for feeling "fed-up" when compared with prepubertal subjects. The opposite applies for the

Table 5.

The Causes of Feeling Fed-up By Sex, Pubertal Status & Age

(% of between group responses per causal category (column) & frequency of responses to each category (shown in parenthesis)

	Issues with Parents	Issues with Siblings	Issues with School	Issues with Class/ Peers	Nothing to do	Failed Attempt	Perceived Injustice	Opposite Sex	Physical Complaint	Other
Sex Male	39.6	50.4	50.0	46.2	64.3	48.0	42.9	23.8	30.6	47.9
	(57)	(65)	(73)	(36)	(9)	(12)	(9)	(5)	(19)	(23)
Female	60.4	49.6	50.0	53.8	35.7	52.0	57.1	76.2	69.4	52.1
	(87)	(64)	(73)	(42)	(5)	(13)	(12)	(16)	(43)	(32)
Axillary Yes	54.2	45.6	58.6	50.0	57.7	72.7	31.6	70.0	51.7	40.6
Hair	(77)	(57)	(82)	(38)	(8)	(16)	(6)	(14)	(30)	(21)
No	45.8	54.4	41.4	50.0	42.9	27.3	68.4	30.0	48.3	59.4
	(65)	(68)	(58)	(38)	(6)	(6)	(13)	(6)	(28)	(30)
Age 10.5-11.5	31.7	36.4	23.1	20.3	21.4	24.0	57.1	14.3	27.0	40.2
Yrs	(46)	(47)	(34)	(16)	(3)	(6)	(12)	(3)	(17)	(39)
12.0-13.0	30.3	28.7	29.9	32.9	50.0	44.0	14.3	28.6	36.5	33.0
	(44)	(37)	(44)	(26)	(7)	(11)	(3)	(6)	(23)	(32)
13.5-15.0	37.9	34.9	46.9	46.8	28.6	32.0	28.6	57.1	36.5	26.8
	(55)	(45)	(69)	(37)	(4)	(8)	(6)	(12)	(23)	(26)

issues with siblings category where prepubertal subjects were the larger percentage of those who responded. Although these were smaller categories overall, nearly three quarters of those who cited failed attempts or the opposite sex as causes of feeling "fed-up" had reached puberty. More prepubertal (68.4%) subjects believed that perceived injustices led to them feeling "fed-up" (Table 5).

Although it seems that pubertal development does not make a difference in terms of those who cited classroom mates and peers as reasons for feeling "fed-up", there is an increase in the percentage of those who were in this category with age, from 20.3% for the first age group (10.5 to 11.5) to 32.9% for the middle group (12.0 to 13.0) to 46.8% for the oldest group (Table 5). A similar age trend exists for those in the issues with school category, with the smallest percentage of subjects in the youngest age group (23.1%) and the largest in the oldest age group (46.9%) (Table 5). As well as puberty it appears that age affects the percentage of those citing perceived injustices and the opposite sex as causes of feeling "fed-up". Just over half of those who cited perceived injustices as a reason were in the youngest age category (57.1%) whereas the exact reverse in numbers is evident for those who cited opposite sex, i.e., 57.1% were in the oldest age group (Table 5). Of those who reported having nothing to do as a cause for feeling "fed-up" 50% were in the middle age bracket (12.0 to 13.0) however there were only a small number of responses to this category and therefore these results may be misleading.

Table 6 presents the results of the open-ended question relating to the behaviour associated with feeling "fed-up". Clearly the most frequently reported behaviour overall when experiencing this state is withdrawal either physically or verbally. This is followed in terms of frequency by

seeking entertainment, verbal abuse, hitting something, seeking sports or other activity, hitting somebody, others, crying, talking to someone, external substance abuse (Table 6).

Although slight differences exist between males and females responses for the withdrawal category, with females having a higher response percentage, much larger differences are evident in some of the other categories (Table 6). Just over three quarters of those who cited crying and talking to somebody as behaviours associated with feeling "fed-up" were females. More females (59.6%) than males (40.4%) also reported hitting something when they felt "fed-up" (Table 6). Sports or other physical activities were cited by males more frequently than females as behaviours associated with the "fed-up" state.

The pubertal status responses comparing prepubertal and pubertal subjects in general were similar (Table 6). A larger percentage of prepubertal subjects (58.3%) cited hitting something as a behaviour they engaged in when fed-up. Conversely a larger number of pubertal subjects stated that they cried (57.9%) when "fed-up" and sought out entertainment (57.7%). The most striking pubertal difference in the smaller response categories was that the vast majority of those who talked to somebody when fed-up had reached puberty (78.9%).

Some marked age changes exist in the behaviours associated with feeling "fed-up". The majority of those who reported hitting something and to a lesser extent hitting somebody were in the youngest age group (10.5 to 11.5). However, 50% or more of those who used verbal abuse, sought sport or other physical activities, talked to somebody when "fed-up" and used external substances such as cigarettes were in the oldest age category (13.5 to 15.0) (Table 6).

Table 6.

The Behaviours Associated with Feeling Fed-up by Sex, Pubertal Status & Age

(% of between group responses per causal category (column) & frequency of responses to each category (shown in parenthesis).

		Hit Somebody	Hit Something	Verbal Abuse	Withdrawal Behaviour	Cry	Seek Entertainment	Sport or Other Activity	Talk to Someone	External Substance Abuse	Other
Sex	Male	51.2	40.4	45.7	43.6	23.8	46.8	57.8	25.0	50.0	46.2
		(21)	(21)	(32)	(58)	(5)	(37)	(26)	(5)	(7)	(12)
	Female	48.8	59.6	54.3	56.4	76.2	53.2	42.2	75.0	50.0	53.8
		(20)	(31)	(38)	(75)	(16)	(42)	(19)	(15)	(7)	(14)
Axillary Hair	Yes	48.6	41.7	50.8	49.6	57.9	57.7	50.0	78.9	53.8	38.5
		(18)	(20)	(33)	(64)	(11)	(45)	(23)	(15)	(7)	(10)
	No	51.4	58.3	49.2	50.4	42.1	42.3	50.0	21.1	46.2	61.5
		(19)	(28)	(32)	(65)	(8)	(33)	(23)	(4)	(6)	(16)
Age Yrs	10.5-11.5	39.0	44.2	22.5	35.1	31.8	30.0	26.1	15.0	14.3	23.1
		(16)	(23)	(16)	(47)	(7)	(24)	(12)	(3)	(2)	(6)
	12.0-13.0	24.4	23.1	25.4	31.3	22.7	30.0	23.9	25.0	28.6	50.0
		(10)	(12)	(18)	(42)	(5)	(24)	(11)	(5)	(4)	(13)
	13.5-15.0	36.6	32.7	52.1	33.6	45.5	40.0	50.0	60.0	57.1	26.9
		(15)	(17)	(37)	(45)	(10)	(32)	(23)	(12)	(8)	(7)

3-3. THE EMOTIONS INVOLVED IN FEELING FED-UP

The profile of emotions shown in Figure 1 clearly indicate that anger is the most common emotion involved in feeling "fed-up" for the adolescent group as a whole. The next most frequent emotions are sadness and shame. The other nine emotions are slightly less prominent and assume a fairly uniform distribution.

Although the total group data give a good overall indication of the emotions involved when feeling "fed-up", analysis of the subgroups (sex, pubertal status and age) has revealed some interesting differences. Figure 2 presents the profile of emotions for males and females in an imagined "fed-up" situation. Although anger is the most prominent emotion overall, *t* - tests performed on the emotion scales revealed that there are significant differences between males and females for this emotion (t (235)=2.44, $p<.01$) and for joy (t (235) =2.76, $p< .006$) (inner) hostility (t (235)= 3.53, $p<.001$) sadness (t (235) = 4.21 , $p< .0001$) and interest (t (235) =2.61 , $p < .01$) . When feeling "fed-up" females experience significantly more frequently anger, inner hostility and sadness and significantly less joy and interest than males (Figure 2). Figure 3 compares the emotion profiles of adolescents who have reached puberty with those who are still prepubertal in an imagined "fed-up" situation. No major differences are evident and this is confirmed by *t*- tests which indicate that there are no significant differences between the responses of the two groups for any of the 12 emotion scales.

Belonging to a certain age group also does not appear to affect subject's emotion profiles significantly (Figure 4). For the most part, subjects in the three condensed age categories responded similarly. Anger was still the predominant emotion for all three age categories (Figure 4). Although there

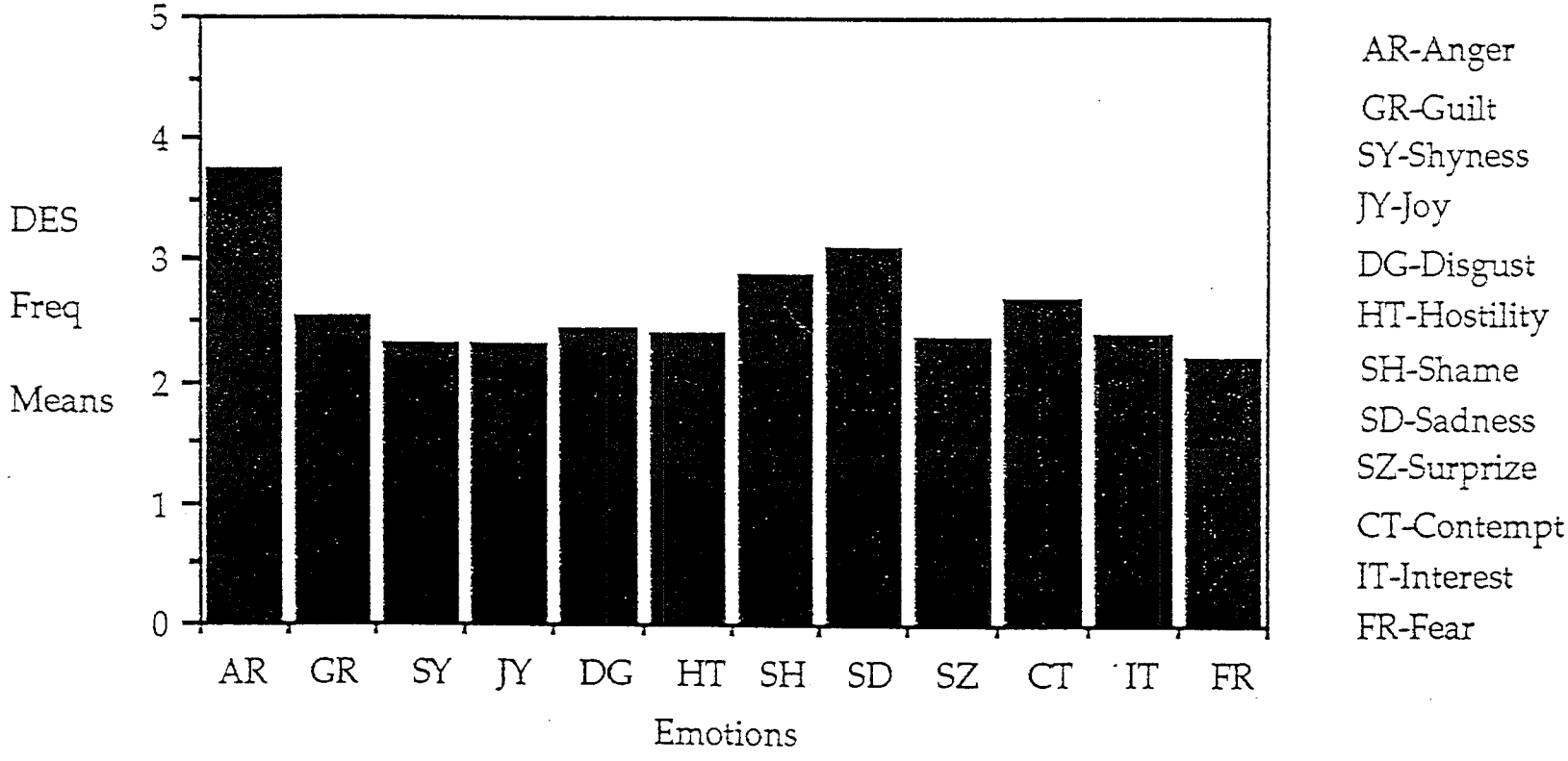

Figure 1: Profile of Emotions in an Imagined Fed-up" Situation

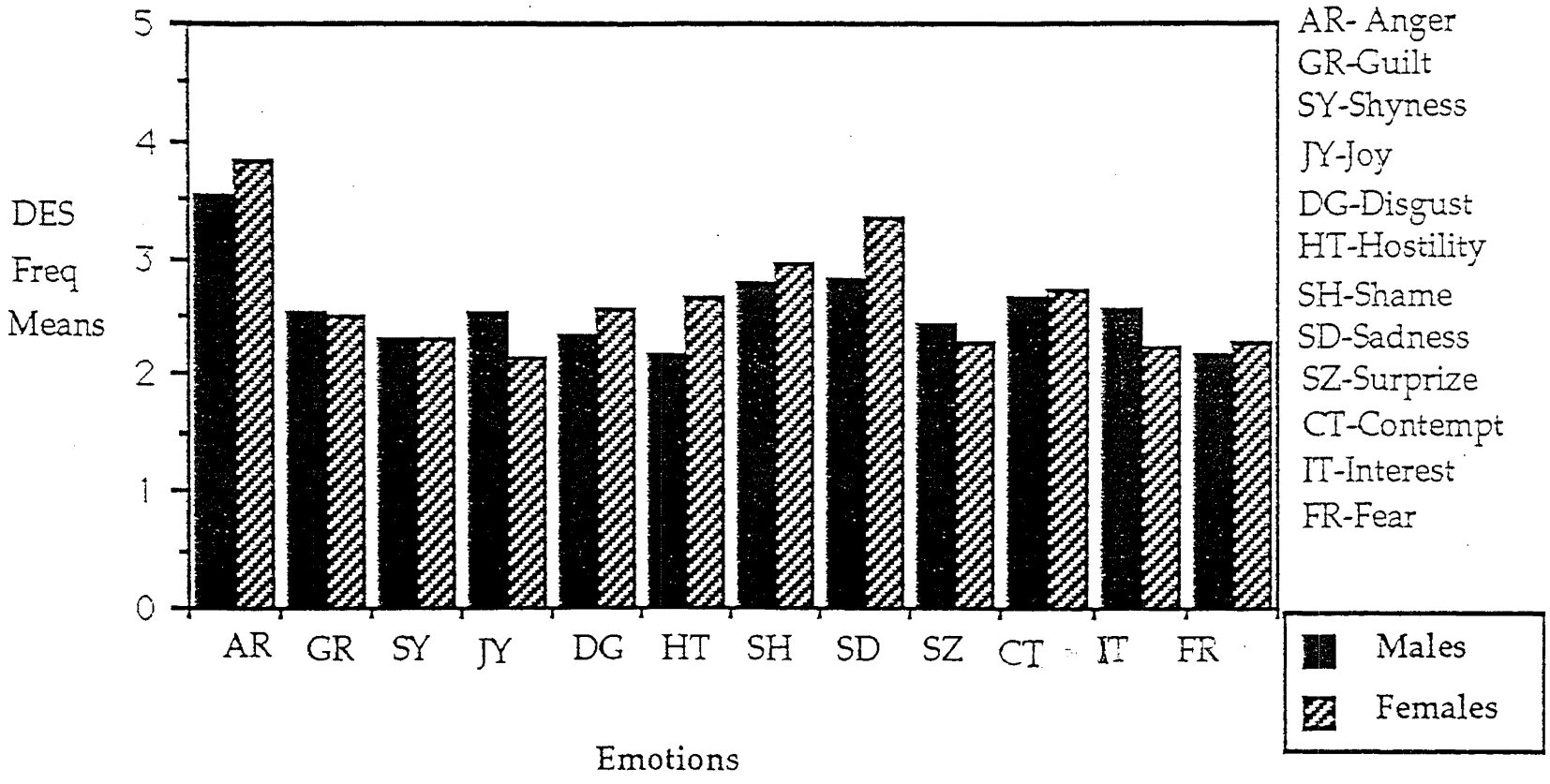

Figure 2: Profile of Emotions by Sex in an Imagined "Fed-up" Situation

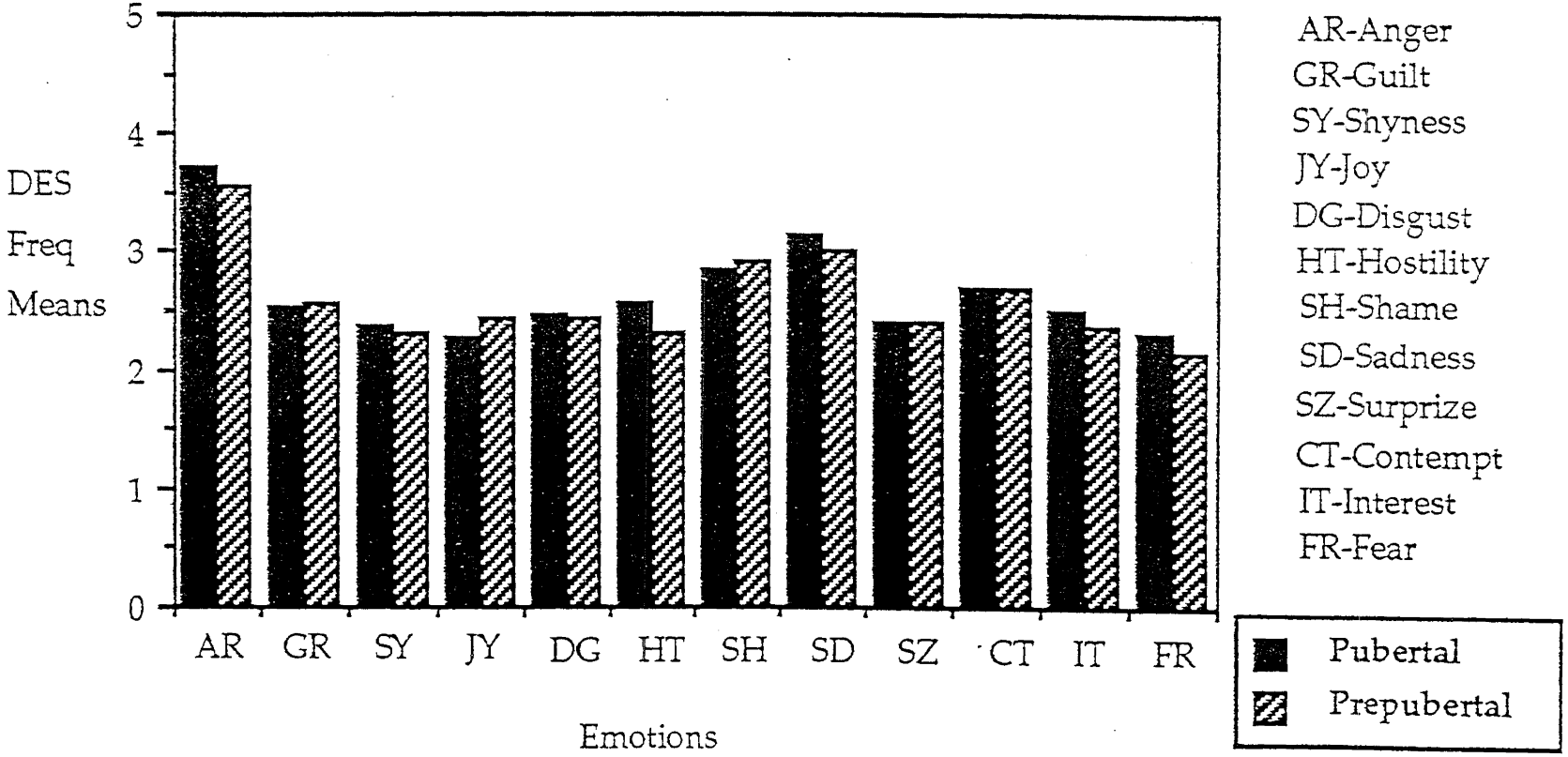

Figure 3: Profile of Emotions by Pubertal Status in an Imagined "Fed-up" Situation

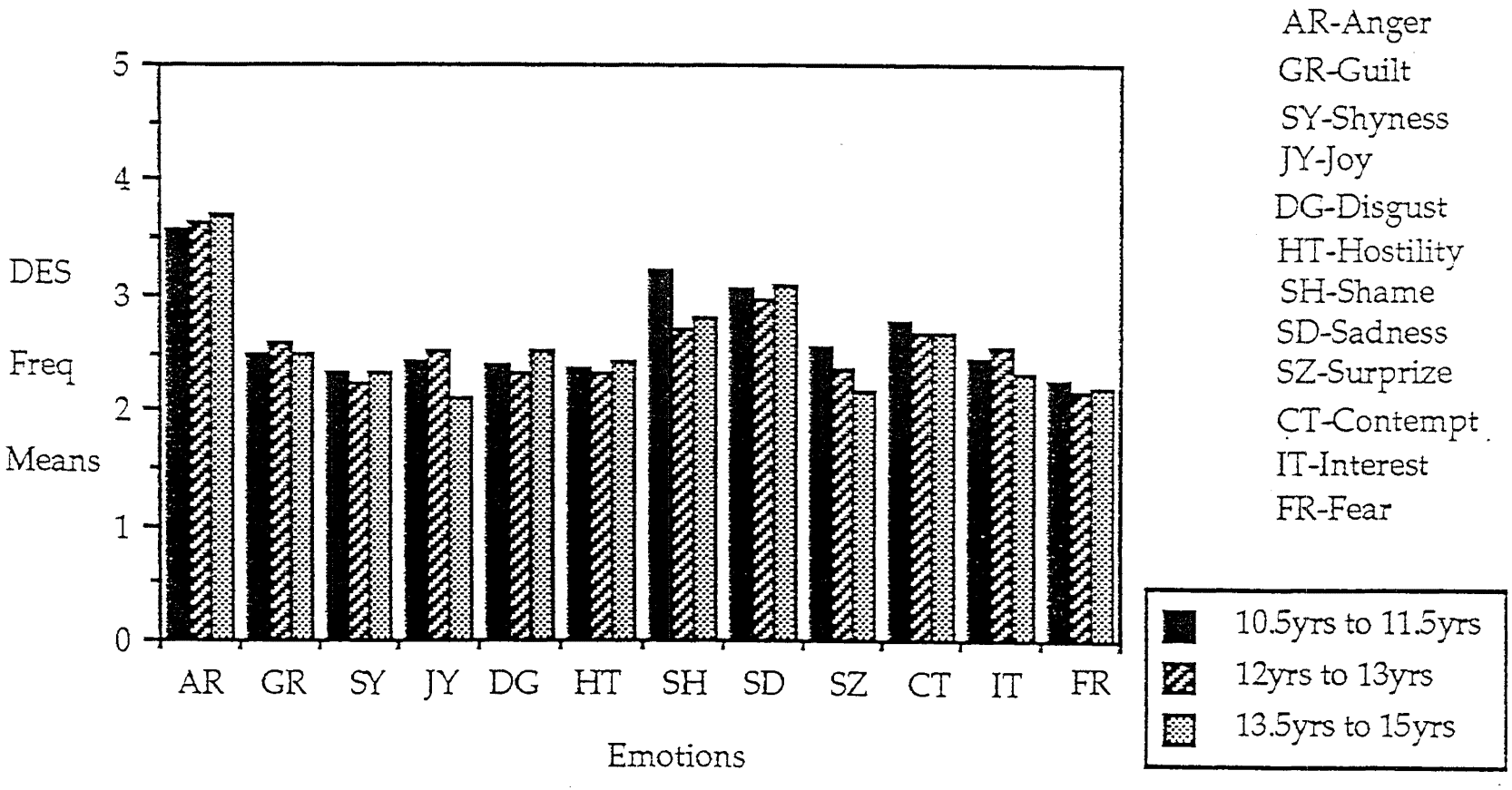

Figure 4: Profile of Emotions by Age in an Imagined "Fed-up" Situation

was a slight increase with age in the frequency of anger felt when "fed-up", this was not found to be significant when analysis of variance was performed on the data. There were no significant differences found between the three age categories for the other emotions scales.

Although there were no significant differences for each emotion scale there are some slight differences in the overall profile of responses with age. The most noticeable being that the youngest age category (10.5yrs to 11.5yrs) experienced a higher amount of shame than sadness when "fed-up" (Figure 4) . This pattern of responses differs from the older two age categories (Figure 4) and the overall DES means shown in Figure 1 where sadness is more prominent.

Anovas were performed on the data to examine any interactional effects from the three variables, i.e., sex, pubertal status and age. Only one significant result was ascertained i.e., sex and pubertal status jointly affected the frequency of joy subjects experienced when feeling "fed-up" ($F(1,227) = 4.38, < .05$). The means indicate that there is an increase in the frequency of joy experienced in feeling "fed-up" upon reaching puberty for males and a decrease for females (Figure 5).

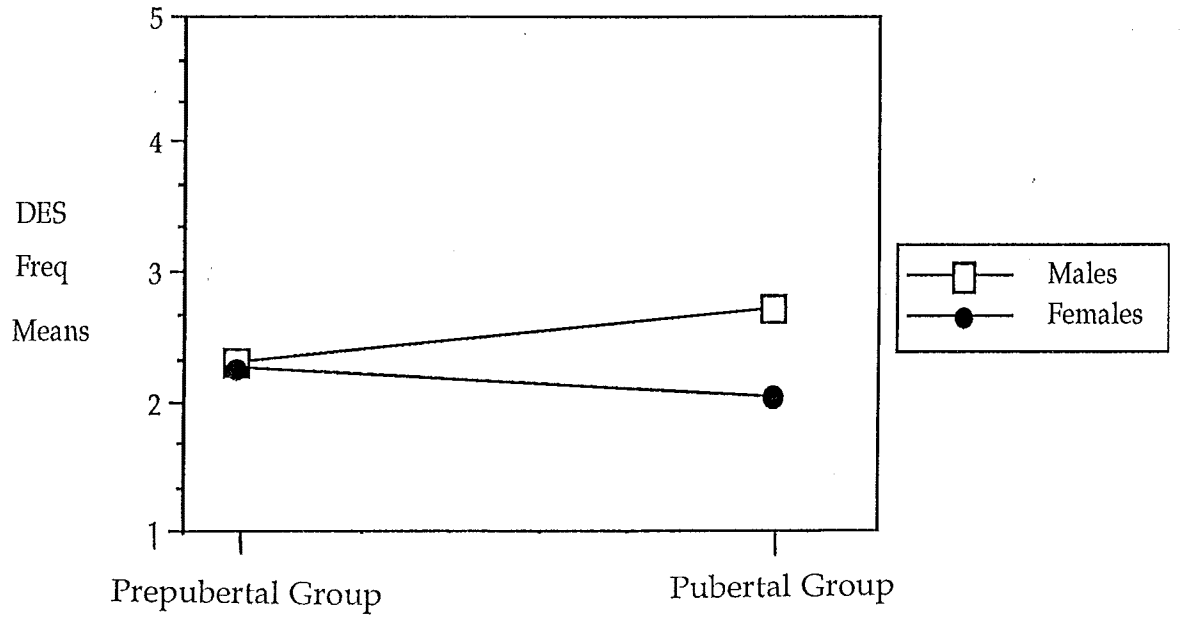

Figure 5: The Effects of Sex and Pubertal Status on Joy

CHAPTER FOUR

DISCUSSION

1. INTRODUCTION

As very little empirical work exists on the development of everyday adolescent emotion, the present research was conducted with the intention of exploring possible changes in aspects of everyday negative emotion (i.e., feeling fed-up) in the preadolescent and early adolescents. Certain inferences and implications were drawn from the review of developmental /emotion theory and related research, which led to the formulation of specific questions to be addressed. Because of the exploratory nature of this work, no set hypotheses were constructed.

Various analyses conducted indicate that the experience of feeling "fed-up" has some qualities similar to being clinically depressed. Differences in certain aspects of the the data however, suggest that it is not experienced as a mild form of "depression" per se. Developmental and gender differences were found for some aspects of feeling "fed-up". These differences are apparent in the duration of feeling "fed-up", the antecedents and behaviours associated with feeling "fed-up" and the emotional patterns experienced when in that state.

The intention of this chapter is to discuss the results of the current study within the context of the literature and questions posed in Chapter One. The main areas of interest, i.e., the frequency and duration of feeling "fed-up", the antecedents of feeling "fed-up", the behaviours associated with this state and the patterns of emotion present within it, will be addressed. A

summary and conclusions section will follow. Lastly the limitations of the current study and future directions will be discussed.

2. GENERAL DISCUSSION

2-1. The Frequency & Duration of Feeling "Fed-up"

Most theories and a few studies implicitly or explicitly suggest that self referent negative feelings are more common in adolescence than in any other life stage (Hall, 1904, Rutter, 1976, Larson et al, 1980, Kandel and Davies, 1982, Izard & Malatesta, 1984, Larson & Lampman-Petraitis, 1989). One might expect therefore, that adolescents are more likely to become "fed-up" than preadolescents. The data of the current study however do not entirely support this notion. No significant differences overall were found between younger/prepubertal and older/pubertal subjects. For the "extreme" group who most frequently felt "fed-up" (more than once a day, Table 3), trends are apparent which are in line with research findings in the depression literature (e.g., Puig-Antich, 1980, Fleming & Offord, 1990). Eighty percent of those in this category have reached puberty and (60%) were in the oldest age category (Table 3). The small numbers in this category however, make conclusions tentative as the results may be spurious or these respondents may be in some way "atypical". For example, they may be clinically depressed, as etiological studies indicate that 11% of adolescents have some serious psychiatric illness (Ebata, 1987). A further "atypical" possibility is proposed by Petersen (1983). She suggests there is a certain subgroup of adolescents for whom pubertal change holds more liabilities. Zakin , Blyth & Simmons (1984) for example, found that attractive girls were more anxious about becoming pubertal than were less attractive girls.

Pubertal changes have been indirectly linked in some individuals to depressive mood variables (Ruble & Brooks-Gunn, 1982).

For the majority of subjects however, age and pubertal status did not have an effect on the frequency with which they felt "fed-up". This general finding is in line with Petersen's (1988) argument addressing the proposed increased commonness of early turmoil in adolescence. She suggests that early adolescents traverse this period with varying degrees of difficulty just as in other periods of life and therefore there is no reason why they should, as a group, experience an increase in the frequency of emotions per se. Age comparative research focusing on adolescent and adult groups indicates that there are no differences in the frequency of negative feelings felt overall, but there may be differences in the salience of these emotions (e.g.,Andrews & Withey, 1976, Offer & Franzen, 1983).

However when considering the "experience" of "adolescent turmoil" discussed by various theorists, frequency is not the only indicator. It may be that preadolescents and adolescents do not differ in the frequency of feeling "fed-up" but may differ on some other temporal dimension, i.e., duration. Data from this study suggest that a significant difference exists between those who have reached puberty and those who have not, in the duration of feeling "fed-up". Those who have reached puberty overall became "fed-up" for longer and therefore spend a larger part of their time in this state (Table 4). From this perspective then feeling "fed-up" may be viewed as a more common phenomenon in adolescence than preadolescence.

Interestingly, the significant effect with duration was found for pubertal status but not for age, giving some support to the biological Mediated Effects Model of emotion and development (Table 4). Although

direct hormonal effects as opposed to socially mediated effects cannot be eliminated because accurate biological measures were not taken, these results tentatively suggest that the social aspects of puberty may be more important. Subjects in the pubertal group would have physically developed to the point that their maturation was evident to others, although both groups would more than likely have had some hormonal changes given that endocrine changes begin at approximately seven year of age (Grumbach, et al, 1974, Tanner, 1975). Research focusing on the social effects of puberty indicates that the attainment of an adultlike body is seen as introducing significant changes in terms of social roles to adolescents, their peers and their parents (e.g., Meyer, 1982). Richards and Petersen (1987) state that the adolescent with a mature body is likely to experience a "different" world and that this experience in turn will influence their psychological functioning in a different way to a peer whose body still appears immature. Extrapolating this to feeling "fed-up", the data from this study suggest that the indirect social and psychological effects of the hormones (physical maturation) have a much larger influence than age per se, on the duration of feeling "fed-up" .

Larson et al (1980) found some differences in adolescent and adult mood, with adolescent negative moods tending to be shorter in duration. On average adolescents mood lasted just under half an hour. Although this was also the overall average for the current study, generally a much higher percentage of those who had reached puberty became "fed-up" for longer periods, i.e., half a day (61.8%) and a day (78.9%) (Table 4). These results suggests there is a need for more research to investigate developmental differences when focusing on adolescent mood rather than considering all adolescents together as Larson et al (1980) have done. Larson et al's (1980)

findings do not extrapolate well to the current study as they combined all negative moods into a composite form. Therefore "depressive" type moods were only one of many negatively perceived moods measured.

Although the literature suggests that gender differences exist in the behaviour and cognitions of depressed adolescents (e.g., body perception (Faust, 1983), coping strategies (Labouvie-Vief et al, 1989), prominence of symptoms (Allgood-Merten et al, 1990) etc., no investigators have focused on the experiential aspects of negative mood variability in relation to gender. The current study examined this issue within the context of feeling "fed-up". No significant gender differences were apparent for the frequency or duration of feeling "fed-up" (Tables 3 & 4). Very few trends emerged from the current data with fairly even responding in each category for both males and females (Tables 3 & 4). Although these data are exploratory, the results may suggest that gender differences are not greatly influential with regard to mood variability of everyday negative mood in adolescence.

2-2. Antecedents of Feeling "Fed-up"

The questions posed in Chapter One inquired around the general antecedent patterns associated with feeling "fed-up" and how they reflect social/cultural living patterns including possible social role and developmental differences. This section will initially address the interpretation of overall patterns in the data with a more substantial section being devoted to subgroup patterns and possible social/developmental implications.

Antecedent response patterns overall tend to reflect the everyday living stressors associated with the adolescent stage, (i.e., issues with parents,

siblings, school, having nothing to do, failed attempts, perceived injustices (to the self), the opposite sex) rather than major global issues pertinent to this cohort, e.g., A.I.D.S., nuclear war, unemployment etc.

Certainly many theories discussed earlier imply or at least acknowledge to some degree the importance of everyday social environmental factors in adolescent development (e.g., Freud, 1938, Blos, 1962, Erikson, 1963, Piaget & Inhelder, 1969, Izard & Malatesta, 1984, Izard, 1985, Richards & Petersen, 1987). According to Lerner (1987) adolescence is seen as a *"stage of poignant encounters with role models outside the family who can potentially serve as important alternative to or modulators of parental identifications"* (Lerner, 1987, p.62). The shift from parental identification to the adolescent's own identity formation is seen by a number of developmental theorists (e.g., Erikson, 1963, Piaget & Inhelder, 1969, Izard & Malatesta, 1984, Kagan, 1985) and investigators (Montemayor, 1982, Lewis, 1984, Siegal & Griffin, 1984, Kashani et al, 1987) as an important time of conflict and negative affect within the home environment. Data from the current study appear to support this notion. The most frequent category responses with regard to the antecedents of feeling "fed-up" were "issues with parents" e.g., parents fighting & adolescent fighting with parents in issues such as parents controlling T.V., radio, stereo, money, time etc, (Table 5). With regard to discordant parental relationships, Lewis et al (1984) found in their study of feeling distressed in preadolescents that parental fighting was the second highest ranking item on the "Feel Bad" Scale. Ritchie & Ritchie (1984) argue that conflict between parents and adolescents is primarily caused by the differences in power between these two groups. They label several "classic plots" which are common scenarios in adolescent

families. For example, the"stop it you're making your (mother/father) sick" plot. Ritchie and Ritchie (1984) argue that this "ploy" is often used with the intention of inducing guilt in the adolescent and thereby producing compliant behaviour. Other "ploys" involve using hypocrisy, double standards or time invested (in the adolescent) scenarios (Ritchie & Ritchie, 1984).

By combining the "issues with parents" category with the "issues with siblings" category, it is clear that family issues overall comprise the vast majority of the causes of feeling "fed-up" (Table 5). No studies to date appear to have examined the role of siblings in adolescent negative mood with most studies focusing on parental/adolescent relations (e.g., Montemayor, 1982. Lewis, 1984, Siegal & Griffin, 1984). The large number of those who attributed their mood to siblings (principally through fighting) in the current study indicates that there is a need for more research in this area.

The other antecedent category with a high response rate was "issues with school". Conflict with the teachers, homework concerns, school curriculum dislikes, etc. were frequently cited causes of feeling "fed-up". Historically, schools have played an increasingly more salient role in the preadolescent and adolescent life period (Winnicott, 1965, Stacey, 1976, Ritchie & Ritchie, 1984). The societal emphasis on academic achievement and the importance of educational qualifications to gain employment in western countries (including New Zealand), has led to increasing pressure on adolescents to perform well and spend more time on academic activities (Bates ,1978, Ritchie & Ritchie, 1984). Falchikov's (1989) investigation into adolescent's thoughts on adolescence indicated that school performance was seen by most as an important component of their lives and was often

associated with feelings of apprehension and other negative emotions irrespective of actual academic ability. Other studies have found similar relationships between negative mood and poor school performance (e.g., Larson et al, 1980, Kashani, Reid & Rosenberg, 1989) however directionality of this association is still unclear.

Although family and school issues overall are the most frequently cited causes of feeling "fed-up" in the current investigation, some differences in response patterns for sex, pubertal status and age are apparent. Response differences are also evident in some other antecedent categories and generally appear to reflect the societal and sex role expectations found in previous work focusing on adolescent depression.

For the three major categories there is little difference between male and female response rates for issues to do with siblings and school, however a much larger percentage of females than males had issues with parents (Table 5). Papini & Sebby (1988) have found more conflict in families with adolescent females. They found parental messages on so called "hot" topics i.e., sex, friends and drinking, were given with more intensity to females than males. Papini & Sebby (1988) argue that the intensity of parental messages may reflect parentally perceived consequences of these situations as particularly damaging to daughters, e.g., sexual promiscuity.

Gender response patterns for the less frequently cited "fed-up" causes in the current study appear to concur with previous findings, however numbers are small and conclusions can be no more than speculative. A much higher percentage of females cited physical complaints (e.g., pimples, being too thin, fat etc.) as causes of feeling "fed-up" (Table 5). Perceived negative changes to physical appearance have consistently been

demonstrated to be a female characteristic of depressive mood (e.g., Friedrich, Reams and Jacobs, 1988, Baron & Joly, 1988, Dorn et al, 1988, Petersen, 1988, Allgood-Merten et al, 1990) and other DSM111R disorders e.g., anorexia, psychosomatic and anxiety disorders. Crockett & Petersen (1987) have found a significant relationship between pubertal status (controlling for age effects) and decreased feelings of attractiveness in females. Allgood-Merten et al (1990) argue that body image for female adolescents is a critical aspect of self-esteem and functions as an antecedent of depressive symptoms with this group. Persistent societal pressures on women to match "unrealistic" body images presented in the media, according to Ritchie & Ritchie (1984), are implicitly adopted by female children approaching adolescence. As puberty approaches, preadolescent females become increasingly "obsessed" with their bodily image.

A large percentage of those who cited the opposite sex as a cause of their "fed-up" state were female (Table 5). This difference in numbers may indicate the differences in heterosexual involvement over the age group investigated in the current study. Research indicates the females in this age group are generally more heterosexually active (e.g., Dornbusch, Carlsmith, Gross, Martin, Jennings, Rosenberg & Duke, 1982, Ostrov, Offer, Howard, Kaufman & Meyer, 1985) and more frequently have romantic thoughts about males than vice versa (Rekers, Saunders, Strauss, Rasbury & Morey, 1989). Relationship thoughts and experiences are a more significant part of young female preadolescent and early adolescent life and therefore are more likely to influence their feelings both positively and negatively. Another possible explanation for this discrepancy comes from those who subscribe to social role and identity formation theory and research (e.g., Freud, 1938, Blos, 1962,

Erikson, 1963, Piaget & Inhelder, 1969, Izard & Malatesta, 1984, Ritchie & Ritchie, 1984, Richards & Larson, 1989). From this perspective a dichotomy is seen to exist between the sexes in relation to identity orientation at adolescence. Females are thought to be more socially oriented forming their identity (including emotions) from social and interpersonal aspects of their lives. Males adolescents however, are seen to identify more strongly with instrumental activities and achievements, e.g., school and sport , taking their frame-of-reference from these activities more often than interpersonal factors (Richards & Larson, 1989). In the current study therefore, if the much higher percentage of females citing the opposite sex as a cause of feeling "fed-up" is viewed in relation to the large percentage difference in the "issues with parents" category then these trends may reflect a greater salience of interpersonal factors in emotional causality in this group (Table 5).

With regard to antecedent response pattern differences for pubertal status and age factors the overall pattern of results indicate that age factors appear to have more explanatory power. The descriptive nature of the data however, mean that the confounding of pubertal and age variables can not be completely discounted.

There is a small trend towards increased frequency of responses with increasing age and pubertal status for the "issues with parents" category. Most theories discussed in Chapter One predict that adult/adolescent conflict will increase from preadolescence to middle/late adolescence as adolescents begin and complete the individuation process (e.g., Freud, 1938, Blos, 1962, Erikson, 1963, Piaget & Inhelder, 1969, Kagan, 1985). What is surprising then given these predictions is the relatively weak trend for both pubertal status

and age found in the current data (Table 5). One speculative possibility is that although the content of issues with parents may change with age and/or pubertal development, the perceived intensity and patterns of the interaction may remain relatively stable. Therefore control issues within the home, discussed earlier in this section, may appear in a different form with increasing age and pubertal status.

A slightly more substantial trend is evident for the "issues with school" category, with an increase in the frequency of responses for pubertal status and age (Table 5). Other related studies have discounted the possible pubertal/school problems interaction. Duncan, Ritter, Dornbusch, Gross, Carlsmith (1985) for example, focused on puberty and school deviance but found that pubertal factors were not significantly associated with school problems. Age factor trends are more prominent and appear to hold more explanatory power (Table 5). School class compositions are fairly homogeneous with regard to age and therefore it seems likely that the "issues with schools" category for the current study, reflects the increased expectations and salience of schools work with increasing class advancement (Ritchie & Ritchie, 1984).

A similar trend for age but not for pubertal status is evident in the "issues with peers and classmates" category (Table 5). A much higher percentage (i.e., 46.8%) of older adolescents, i.e., 13.5-15.0 year olds, selected this as an antecedent of feeling "fed-up" than the other age groups. (Table 5). Once again this result may reflect the increasing amount of time spent in peer activities with age (Larson et al, 1980, Montemayor, 1982, Ritchie & Ritchie, 1984,) but it may also reflect the increasingly important socialisation function that peers fulfil. Research indicates that the increased salience and

influence of peers with age has a social regulatory function (Montemayor, 1982, Kelley & Hansen, 1987). Kelley and Hansen (1987) suggest that this peer interaction provides a setting for experimentation with new thoughts, behaviours and emotions. Peer interactions help adolescents refine their skills for dealing with and expressing negative emotions such as anger (Kelley & Hansen, 1987). Therefore with the increased peer involvement with age, it seems likely that peers/classmates will increasingly became the antecedents of feeling "fed-up".

A small decrease in "issues with siblings" is evident with pubertal change but not for age (Table 5). This may indicate that the observed trend is spurious (the most likely explanation) but raises the question as to whether pubertal change in some way effects the relationship between the adolescent and their sibling. Further research is needed to clarify this.

For the smaller categories, both age and puberty affect the percentage of those citing perceived injustice and the opposite sex as causes for feeling "fed-up". Once again small numbers make interpreting of these findings tentative only. The "it's not fair", perceived injustice phenomenon appears to decrease as adolescents develop (Table 5). Cognitive developmental theory may provide one explanation for this. Piaget & Inhelder (1969) suggest that as the child develops and moves from the concrete operational phase approximately 7 to 11 years) to the formal operational phase (11-15 years) they become essentially less egocentric in terms of cognitive ability. Piaget (Wadsworth, 1984) characterised adolescents as "emerging scientists" with the ability to consider reality as a subset of possibilities. Carrol & Steward (1984) found in a study looking at children and adolescents understanding of themselves and their feelings, that adolescents were increasingly more

objective observers of the "self" and more aware of external frames of reference. Therefore increasing ability to understand alternative explanations and recognise alternative viewpoints with development may allow adolescents to understand significant others (e.g., parents) interpretations and explanations for the said "injustice". It is unclear why pubertal status should influence the selection of this category, it may be that significant others change their behaviour in some way in response to perceived maturity, i.e., physical maturation. This claim is once again speculative as no studies have addressed this issue.

Not surprisingly both age and pubertal status are implicated in the trend towards an increase in numbers of those who cited the opposite sex as a cause of feeling "fed-up" (Table 5). Studies of adolescent patterns indicate that heterosexual involvement begins for females at approximately 12 years and males 14 years (Turner & Helms, 1983) and therefore one might expect an increased number of adolescents become involved with the opposite sex, with increasing age and physical maturity. Although confounds should be acknowledged in the descriptive data presented currently, a related study addressing pubertal and age factors in dating relationships found that sexual maturation added very little to the explained variance in dating after age (Dornbusch, Carlsmith, Gross, Martin, Jennings, Rosenberg & Duke, 1981). These researchers suggest that age with regard to heterosexual behaviour is a reflection of socially constructed "institutionalised" images and that these images need not be synchronous with sexual development in dating behaviour (Dornbusch et al, 1981).

It appears that pubertal status may be more important than age in those few citing failed personal expectations (failed attempts) as a cause of

feeling "fed-up" (Table 5). Data patterns indicate that 72.7% of those who responded to this category had reached puberty whereas no clear incremental patterns are evident with age (Table 5). The lack of research in this area makes it difficult to draw conclusions with regard to any possible explanations for this result. Physiologically based literature may provide some speculative possibilities. Failed personal expectations, in a sense, could be considered as non-reward experiences which have been previously rewarded. Amsel (1962, cited in Strongman, 1987) proposed a theory of frustration based on the assumption that non-reward which has been previously rewarded produces frustration. Frustration is seen to increase vigour of responding (Strongman, 1987) and therefore must involve some physiological bodily changes. It is possible therefore that for early adolescents pubertal hormones directly or indirectly effect the experienced physiological changes when an adolescent realises they have failed in a personal attempt, possibly making them more prone to feeling "fed-up" than their preadolescent counterparts. More accurate physiological measures than those taken in the current study are needed in order to test this tentative hypothesis.

2-3. Behaviours Associated with Feeling Fed-up

This section will address the questions concerning the behaviours associated with feeling "fed-up" The general findings of the current study will be initially discussed in relation to existing research and theory in order to provide answers to the questions in Chapter One concerning whether feeling "fed-up" is a motivator of behaviour and what coping behaviours are associated with it. Differences in developmental and gender factors will also

be addressed.

Overall the pattern of results suggest that adolescent coping behaviours when feeling "fed-up" are similar to those of clinically depressed individuals except the duration data indicate they are shorter lived. The most common behaviour associated with feeling "fed-up" was withdrawal either physically or verbally from the eliciting situation (Table 6). Withdrawal behaviour has been a frequently observed coping strategy in adolescents (Weiner & Graham, 1985, Patterson & McCubbin, 1987). According to Patterson & McCubbin (1987) their data suggest that withdrawal behaviour is seen by society as "undesirable" despite evidence that adolescents use withdrawal primarily as a way to manage emotional tension. In this sense then withdrawal, when feeling "fed-up" might be seen as functionally adaptive and not maladaptive. Although temporary withdrawal may be adaptive, evidence from studies focusing on clinical depression in adolescence indicate that depressed individuals seek social isolation for prolonged periods in various situations, e.g., classrooms, friends and family (Larson et al, 1990). Larson et al (1990) in their study of depression in late childhood and early adolescence, found a significant difference between depressed and non depressed subjects in the amount of time they spent in the bedroom (more for the depressed) and in public (less for the depressed). Izard & Schwartz (1986) argue that abnormal emotions such as depression result from a missing link between behaviours, emotions and cognitions. They suggest that the primary cause of depression is a failure to develop appropriate behavioural skills and therefore adapt to the changing environment (Izard & Schwartz, 1986). Thus, for some individuals what may begin by being an appropriate adaptive coping strategy, i.e., temporary

withdrawal, may develop into a maladaptive strategy, i.e., prolonged social withdrawal. The association between "abnormal" negative emotions and withdrawal may in part, reflect the societal view that any social withdrawal is undesirable found by Patterson & McCubbin (1987).

The next most frequently cited coping strategy in the current study was "seeking entertainment" , i.e., watching T.V., listening to music, reading, playing video games (Table 6). Active diversions such as these have been used successfully in the clinical population as an effective coping strategy to help reduce emotional tension (e.g., Hawton, Salkovskis, Kirk & Clark, 1989) emphasising this as an adaptive strategy. The findings of the current investigation relate well to Patterson & McCubbin's (1987) study. Using factor analysis they found several clusters of coping behaviours used by adolescents in general, one of which they named "seeking diversions". These included watching T.V., reading, working on hobbies, going to a movie etc. (Patterson & McCubbin, 1987). Some differences in items are apparent when compared with the current study (e.g., the use of drugs and sleep items) but most are very similar if not the same. Unlike this study, however, Patterson &McCubbin (1987) found "seeking diversions" to be the most frequently sought coping strategy and withdrawal or "avoiding problems" one of the least frequently used. This study found withdrawal to be the most frequently used method of coping when feeling "fed-up" (Table 6). Methodological reasons may explain some of the differences between the finding of the two studies, although differences might also reflect the nature of feeling "fed-up". Research indicates there is a link between socially withdrawn behaviour and depressed mood (Rutter, 1976, Greydanus, 1986, Marcoen, Goossens & Caes, 1987, Larson et al, 1990) and therefore the current

results may reflect the "depressive" behavioural characteristics of this state.

Other frequently named coping strategies in the current study include verbal abuse, hitting something, seeking sports or other activities and hitting somebody (Table 6). Patterson & McCubbin (1987) found verbal ventilation of feelings to be a reasonably common response in adolescents. The larger verbal as opposed to physical response may possibly reflect the postulated trend with age towards more socially appropriate verbal and less physically reflexive responsivity (Izard & Malatesta, 1984, Kagan, 1985). The current data indicate, however, that generally a large number of preadolescents and adolescents still use physical coping strategies when feeling "fed-up". Some of these strategies could be socially considered as adaptive, i.e., playing sport/activities and others, e.g., hitting someone, may be considered less appropriate by society.

Focusing on subgroups, differences in the various coping responses are apparent for gender (Table 6). Slightly more females (56.4%) than males (43.6%) withdrew physically or verbally from the "fed-up" eliciting situation (Table 6). Related research examining depression in this age group, in contrast, has found depressed males overall tend to spend more time alone and less time with friends and family (Larson et al, 1990). Measures in Larson et al's (1990) study were cumulative however focusing on sampling daily behaviours, therefore their analysis was concerned with time spent overall as opposed to looking at behaviour in a reactive sense as this study has done. It may be therefore that females are more likely to use social withdrawal as a reactive coping strategy because of their greater social orientation (Rekers, Sanders, Rasbury, Strauss, Morey, 1989, Richards & Larson, 1989).

Some of the other category responses reflect more clearly gender role behaviours. The most striking of these is that just over three quarters of the small number who reported "crying" and "talking to somebody" when feeling "fed-up" were female (Table 6). These findings concur with most research examining sex role behaviour in adolescence (e,g,.Ritchie & Ritchie, 1984, Patterson et al, 1987, Kurdek, 1987, Baron & Joly, 1988, Rekers et al, 1989, Richards & Larson, 1990). For example, Baron & Joly (1988) found in their investigation into the expression of adolescent depression, that crying was a significant characteristic of female depression whereas male depression was characterised by feelings of not being unable to cry. The use of talking to others as a coping strategy has been found to be a particularly common behaviour for females in general (Montemayor, 1982, Hortacsu, 1989, Rekers et al, 1989, Larson et al, 1990, . Research has found that female children when compared with male children, spend more time talking to others (Richards & Larson, 1990). Upon reaching adolescence, the amount of time spent talking doubles for females but not for males highlighting the increased importance of interpersonal behaviour for this group (Patterson et al, 1987, Richards & Larson, 1990). Richards & Larson (1990) offer an explanation for discrepancies in style of coping behaviours for males and females, by suggesting that basic behavioural differences reflect different socialisation practices and hence different identity focuses. According to these researchers, adolescent females increasingly tend to use more interpersonal coping strategies whereas males spend more time in instrumental activities because these participation differences reflect societal expectations (Richards & Larson, 1990).

The pattern of data in the current research to a large extent appears to

support the interpersonal vs. instrumental female/male dichotomy found in Richards & Larson's research (1990) and others (e.g., Kurdek, 1987, Hortacsu, 1989, Rekers et al, 1989,). (Table 6). Males in the current study , for example, more often cited playing a sport or engaging in some other physical activity and these results parallel the findings of a number of other studies on adolescent behaviour (e.g., Kurdek, 1987, Rekers et al, 1989, Richards & Larson, 1990).

Some data from the study do not reflect the typical "feminine" behaviour as predicted by theory and research findings. More females (59.6%) than males (40.4%) for example, reported "hitting something" such as a pillow, kicking the wall, slamming the door etc., in response to feeling "fed-up" (Table 6). Rekers et al (1989) found aggression as an expression of behaviour, was considered a more masculine activity and therefore not considered by society part of the "normal" female behaviour repertoire. Although some researchers argue that feminine characteristics are closely associated with depressive etiology (e.g., Gilbert, 1981), a study of adolescent depressed mood by Craighead & Green (1989) suggests that feminine characteristics per se do not play a role in depression. They argue that socially undesirable feminine characteristics, including aggression, are much more likely to be associated with depressed mood. This finding supports the tentative link in the current data between feeling "fed-up" and gender behaviours characteristic of depression.

Overall the data indicate a trend towards more verbal interaction and less physical aggression with pubertal status and age (Table, 6). Although withdrawal was the predominant coping strategy for all subgroups, other categories support this claim. For example, more younger and prepubertal

subjects hit something in response to feeling "fed-up", whereas a much larger percentage of those who reported using verbal abuse and talking to someone were in the older age and pubertal groups (Table 6). Advanced cognitive development may allow for adolescents more readily to express their feelings in verbal rather than physical terms (Schwartz & Trabasso, 1985). Adolescents may also be responding to societal cues regarding the inappropriateness of physical violence with age and physical development. According to Ritchie & Ritchie (1984) acting out behaviours are increasingly frowned upon by parents, peers and society in general as the individual continues to develop from preadolescence to adolescence.

Although using physical aggression as a coping response may decline with age and pubertal development, physical activity in itself appears to increase at least with age (Table 6). This finding concurs with Kurdek (1987) and Patterson & McCubbin's (1987) studies, where they found an increase in reported physical activity as coping strategy with age.

Kurdek (1987) also found an increase in entertainment seeking with age. The current study found a similar trend for pubertal status and to a lesser extent age (Table 6) More subjects who had reached puberty (57.7%) sought entertainment when compared with the prepubertal group (42.3%). It is difficult to provide any clear explanation for this discrepancy. One possibility is that pubertal adolescents may have a greater variety and access to entertainment options in and outside of the home environment e.g., the movies, playing video games in arcades, because they are seen by their parents as more "mature" than their preadolescent peers. Studies focusing on family interactions with preadolescent vs. adolescent children, suggest that parents' attitudes with regard to allowing more leisure freedom differ

substantially between these groups (Steinberg, 1981, Papini & Sebby, 1988).

Overall there appear to be an increasing repertoire of coping strategies (both those considered developmentally appropriate and inappropriate), available with age and pubertal status. Not surprisingly the current study found an increase in those who used external substances as a means of coping with feeling "fed-up" (Table 6). Although the small numbers of responses in this data category make any trends tentative, Kurdek (1987) found a substantial increase in the use of external substances with age. Lifespan studies of emotion indicate that coping strategies characterised by "hostile reactions" and escapism decrease with ongoing age, so that by middle adulthood more "mature " defences and strategies are used, e.g., altruism, humour, suppression etc. (Labouvie-Vief et al, 1989a)

2-4 The Emotional Patterns Associated with Feeling "Fed-up"

The initial part of this section will be devoted to discussing what emotions are involved in feeling "fed-up" and the implications of these. Attention will then turn to addressing the other questions posed in Chapter One, i.e., do the emotional profiles change with gender or adolescent development (pubertal status or age).

The current study indicates that the most common emotion evident in feeling "fed-up" is anger, followed by sadness and thirdly shame (Figure 1). Although these emotions are within the depressive-related group of emotions (Blumberg & Izard, 1986, Izard & Schwartz, 1986, Stapley & Haviland, 1989) differences exist in the salience of these prominent emotions indicating that feeling "fed-up" may differ experientially from feeling depressed. Unlike the current study, investigations of depressed adolescents

and adults reveal that sadness is the most salient emotion in this group, with anger being a less prominent feature (Izard & Schwartz, 1986).

The current findings appear to support the bioadaptive theories of Izard et al (1974) , Izard & Malatesta (1984), Izard (1985) and Izard & Schwartz's (1986) that emotions serve an adaptive function. Shame is thought to activate anger as it is often experienced as rejection or hostility from others, which in itself generates outer directed hostility (Lewis 1971, Izard, 1977). According to Izard & Schwartz (1986) anger has an energising function creating strong tendencies to action whereas sadness motivates the individual to seek isolation and slows down the rate of processing information enabling them to reconnoiter and make recovery plans (Izard & Schwartz ,1986). According to Izard (1986) anger and shame act as as ameliorators against depression because they increase social, cognitive and motor skills and competencies that strengthen the self making it less vulnerable to depression in the future. Averill (1982) acknowledges the functional significance of anger at a more interpersonal level and argues that although the short term effects of this emotion are largely negative, i.e., people do not generally feel good afterwards, in the long term consequences are beneficial because of the socially disinhibiting properties of this emotion which allow for freer interchange and subsequently increased mutual understanding. The data from the current and previous sections support these notions. Anger, sadness and shame are the most prominent emotions overall, with shame possibility activating (or reactivating) anger which mobilises the adolescent to action. This action may lead to conflict and disinhibited exchange which could serve a particularly important developmental function at this time by increasing significant others

understanding and appreciation of the adolescent as an individual in their own right. The sadness experienced when feeling "fed-up' may prompt the adolescent to seek isolation or withdrawal in order to reconsider their situation. From this perspective it appears that *feeling "fed-up" is an important adaptive state, at least in the adolescent phase.*

Significant differences for gender were found in this study for some emotions, i.e., anger, sadness inner hostility, joy and interest (Figure 2). "Fed-up" females experienced significantly more frequent anger, sadness and inner hostility and significantly less joy and interest. Except for anger, these findings in general concur with research on gender differences in emotional patterns of depression (e.g.,Izard & Schwartz, 1986, Blumberg & Izard, 1986, Labouvie-Vief et al, 1989b, Stapley & Haviland, 1989).

In the current study females more frequently experienced anger when feeling "fed-up". This higher presence of anger for females may have some relationship to the noted greater level of conflict in female adolescent communication especially with family and peers (Papini & Sebby, 1988). Anger is seen to facilitate an approach response and prompt communication (Plutchik,1980, Averill, 1982), therefore if female adolescents more often feel angry when "fed-up" it is likely that they will engage in "heated debate" more readily than their male counterparts. The higher numbers of females citing issues with parents and peers in current investigation adds support to this notion (Table 5).

Females also appear to experience sadness more often when feeling "fed-up" . Stapley & Haviland (1989) found differences in the salience of sadness for depressed males and females, may reflect early socialisation differences in this emotion, with overt displays of sadness, e.g., crying seen

as less appropriate for boys than girls. Therefore, males may be less likely than females to admit to or even be able to readily access and label feeling sad in the "fed-up" state.

The association between inner-directed hostility and female depression has been documented in many studies (e.g., Izard & Schwartz, 1986, Baron & Joly, 1988, Stapley & Haviland, 1989, Labouvie-Vief et al, 1989b, Larsen et al, 1990, Allgood-Merten et al, 1990). Baron & Joly (1988) and Allgood-Merten et al (1990), have found strong links between inner-directed hostility and appearance related concerns for depressed female adolescents. The current study found a large percentage (69.4%) of those who reported physical complaints (e.g., pimples, being too tall or short, fat or thin etc.) as a cause for feeling "fed-up" were female (Table 5). These data add support to the female physical appearance/inner directed hostility hypothesis. Physical appearance in adolescent females appears to be an important antecedent for feeling "fed-up" (equally as important as issues with peers, see Table 5) and inner-directed hostility is a marked characteristic of female as opposed to male, emotional patterns when in this state (Figure 2).

It appears from the current results that males experience significantly more joy and interest when feeling "fed-up" (Figure 2). These results are consistent with Izard & Schwartz (1986) findings on depressed 10-11 year olds. Depressed males experienced more joy and interest than their female counterparts. There are no clear explanations as to why males may feel more joy and interest when in a negative depressive state, although their postulated less internally directed focus (Duncan, Ritter, Dornbusch, Gross & Carlsmith, 1985, Baron & Joly, 1988, Papini & Sebby, 1988) may lead them to better direct their attention towards external rather than internal stimuli.

Feeling "fed-up" for males therefore may be a less negatively experienced emotion. Although these results could be seen as an artifact of response differences in the DES itself, Stapley and Haviland (1989) found no apparent sex differences in responses for joy or interest in their study of general adolescent DES responses .

No significant pubertal or age trends in the emotional patterns of feeling "fed-up" were noted (Figures 3 & 4) indicating a relative continuity and ongoing refinement throughout this developmental period as predicted by Izard & Malatesta (1984) rather than major changes to the emotional patterns. The only slight difference in the overall emotion profiles with age was that the youngest age category (10.5-11.5yrs) experienced a higher amount of shame than sadness when "fed-up". According to Mosher & White (1979) shame involves a self-reflexiveness which includes, blushing, self consciousness and embarrassment, The slightly more frequently experienced shame when feeling "fed-up" may therefore reflect the more overt egocentric nature of the younger subjects.

Investigations into the joint affects of the three variables, i.e., sex, pubertal status and age, revealed only one significant result. Both sex and pubertal status jointly affected the frequency of joy experienced when feeling "fed-up". For males, when feeling "fed-up" there was an increase in the frequency of joy experienced with puberty and for females a decrease. Because of the dearth of research and theory in this area very few direct explanations are apparent. Findings consistent with the biological Mediated-Effects Model offer one possible explanation. Crockett & Petersen (1987) have found there is a general enhancement of body image and improved

mood with advanced pubertal status for males, but decreased feelings of attractiveness and other body concerns for females. Therefore pubertal change and others reactions to it may differentially affect the amount of joy experienced for males and females overall, but especially when feeling in a reactive negative state such as feeling "fed-up". This finding further supports the earlier notion postulate that feeling "fed-up" may be a more unpleasant experience for pubertal females than for pubertal males.

3. SUMMARY AND CONCLUSIONS

The current study focused on the experience of feeling "fed-up" in the preadolescent/adolescent period. The effects of gender, age and pubertal status were examined and each was found to have some relevance to different aspects of feeling "fed-up". Pubertal status was found to be particularly relevant to the experienced duration of this state and to some antecedents and behaviours associated with it. Age factors appear to play a more prominent role in other antecedents and coping strategies. Gender differences significantly affected the emotions experienced when feeling "fed-up" as well as some antecedents and coping strategies. These findings suggest that developmental researchers may need to be more flexible, using multiple measures and varying their definitions of adolescence according to the phenomena they are dealing with rather than using one global measure such as age, to explore all aspects of a phenomenon. It may be, for example, that duration and other mood variability measures are more biologically determined, whereas for coping strategies age related changes may be more salient. Further work is needed to address these issues.

Overall the results of the study provide a further contribution to the meagre amount of existing work on "normal" adolescent emotions. Depending on how it is defined, it appears that there is some support in the current data for the notion that emotional turmoil is more common in adolescence. Although there were no overall incremental trends in the frequency of feeling "fed-up" on any variable under investigation, there were pubertal differences in duration when feeling "fed-up". Pubertal subjects became "fed-up" for longer than preadolescent subjects, with many spending 1/2 a day to a day in this state. Pubertal subjects therefore spent a larger part of their time in this state. From this viewpoint, it seems that everyday negatively perceived feelings are more common in pubertal adolescence.

No apparent gender differences were found in either the frequency or duration of feeling "fed-up", suggesting that gender may not be greatly influential in everyday mood variability factors (frequency and duration), at least in feeling "fed-up". Whether this is a common phenomenon with regard to these factors is yet to be answered.

For the majority of adolescents, the antecedents of feeling "fed-up" reflected everyday living stressors rather than current major global issues such as the environment, A.I.D.S., nuclear war, etc. Not surprisingly, "issues with parents" were the most frequently cited cause of feeling "fed-up". As predicted by the individuation developmental theory (e.g., Erikson, 1963) an increase in the number of subjects citing "issues with parents" was observed with age and pubertal status.

When combined with siblings, issues with direct family makes up the largest number of responses by far. Although a large number of siblings

were cited as the cause of feeling "fed-up" in the current investigation, no other studies to date have examined the sibling role in adolescent mood.

Subject responses in this study tended to reflect stereotyped sex role patterns and may provide some support for the notion that males and females take their emotional cues from gender congruent sources, (i.e., social interpersonal context for females and work or instrumental context for males). Females in the current study more often cited "issues with parents", "physical complaints" and the "opposite sex"; a pattern which has been observed in studies of depressed female adolescents (e.g., Baron & Joly, 1988, Richards & Larson, 1989).

Other frequently cited antecedents of feeling "fed-up" were, "issues with school" and "issues with peers". An apparent age trend in both these categories may reflect the changing nature of parental and societal expectations. School and peers become an increasingly more salient part of an adolescent's life with age.

In terms of coping strategies, there appear to be some similarities between what adolescents do when "fed-up" and depressed adolescent behaviours. Withdrawal is by far the most common behaviour associated with feeling "fed-up", as is social isolation in depression. However there is a temporal difference between these two emotional states. Feeling "fed-up" is a short-term reactive and adaptive state, whereas social withdrawal observed in depressed individuals is long-term and could be considered as maladaptive.

"Seeking entertainment" was also a popular coping behaviour when feeling "fed-up". Clinical studies has demonstrated that diversion tactics such as seeking entertainment are effective against reducing emotional

tension and thus are likely to be effective in coping with feeling "fed-up".

Data from the coping strategy section in the current study also provide some support for the female interpersonal/male instrumental hypothesis discussed earlier. More commonly reported female coping behaviours, i.e., crying and talking to somebody, are consistent with findings in the depression literature and highlight activities consistent with the female stereotype. Males reported more frequently engaging in sporting and other physical activities as predicted by the sex role hypothesis.

Developmental changes in coping strategies are in line with theoretical predictions regarding cognitive maturation and increased social expectations. Data indicate a trend with age and pubertal status, towards more verbal and less physical aggression. This is balanced by an increase in the overall coping strategy repertoire, including more participation in sport and other such physical activities. The noted change may reflect an increased social control with development over emotional expression. Further empirical work is needed to test this notion.

The patterns of emotion present when feeling "fed-up" in adolescence indicate that anger and shame are more often present in this state than when individuals are depressed where sadness is the prominent emotion. This suggests that feeling "fed-up" is experientially different from depression and thus is not in Meyerian terms a "mild" depression.

Izard & Schwartz (1986) & Averill (1982) theoretical premises provide some explanatory power for the current data by suggesting that shame is activated by external sources and often activates anger which in turn energises the adolescent toward interpersonal debate. The feeling of sadness prompts the individual to seek isolation to reconsider. The high

prominence of shame and anger according to Izard & Schwartz (1986) acts as an ameliorator against depression, further supporting the notion that feeling "fed-up" is an important adaptive state during adolescence and possibly in other life stages.

Gender differences were found in the current study for anger, sadness, inner-directed hostility, joy and interest, further substantiating findings regarding differential experiences in negative emotional states. Overall the data indicate that the experience of feeling "fed-up" may be less negatively perceived for males with more joy and interest experienced. Interactional data suggest that feeling "fed-up" is particularly unpleasant for pubertal females, whereas puberty seems to ameliorate the experience of this state for males with males experiencing more joy after puberty.

Although various findings support the notion that males and females experience negative moods differently, one cannot ignore the possibility of response biases, i.e., males and females may respond differently or conform to stereotypes when reporting feelings rather than reporting their true experiences.

The homogeneity of responses regarding the patterns of emotion with age and pubertal development, indicates that the feeling of being "fed-up" has been cognitively stored and emotionally labelled by 10.5 years and that continuing development is in terms of further refinement rather than formation at this state.

Overall the current study appears to support the bioadaptive model of emotion. The following theoretical formulation is postulated. Continuing issues associated with developmental and gender appropriate everyday stressors such as parents, school and friends provide the antecedents to feel

"fed-up". The emotions experienced when feeling this way energise the adolescent towards dealing with the stressor usually in an "adaptive" way by withdrawing from the aggravating stimulus or distracting themselves from it, in order to reduce the level of "emotional tension" created by this state. As feeling "fed-up" is a short-term reactive state, once a reduction in emotional tension is achieved (this may depend on biological factors), the individual is then ready to continue with other activities.

4. RESEARCH LIMITATIONS AND DIRECTIONS FOR FUTURE RESEARCH

Many limitations become apparent over the course of an exploratory investigation and this study is no exception. The bounds of limitations versus future directions are less clear in exploratory work of this nature as there are few empirical linkages available. This section will jointly address the limits of the current study and implications for future research when appropriate.

Some limitations in this study are, in a sense global, in that they apply to other work on emotion using similar methodology. For expediency a cross-sectional design was used, however this is limiting especially when investigating developmental progressions. With a cross-sectional design, changes in development must be inferred from data on different individuals at various stages, therefore particular differences in a group due to some historical or other factors may effect the pattern of results and thus lead to inaccurate assumptions. Although longitudinal work is to be preferred for developmental issues because it provides more continuity, it is very time consuming and beyond the scope of this thesis.

The current study used a self-report method to investigate the

experiential component of feeling "fed-up". Self-report has been acknowledged as a useful and appropriate way of investigating experiential psychological phenomena however this method is solely reliant on how individuals conceptualise and verbalise their emotions and therefore is subject to certain distortion. It would be desirable and possible to cross validate self-reports of feeling "fed-up" with measures of actual behaviour. For example, the premise and method of observing and classifying facial expressions into emotional categories (e.g., Izard (1972) and Ekman et al (1980)), could be used to corroborate the self-report data on experienced emotions during the "fed-up" state. Direct observations of antecedents and behaviours may provide more information about the social interactional processes instigating and maintaining this state. Further work is needed in this area.

Direct observation of behaviour may also clarify the gender (and perhaps developmental) difference issues observed in the current study. Two possibilities exist here, firstly that gender differences may really exist between the emotions experienced and behavioural expression, or alternatively, it may be that self report is more sensitive response biases regarding social norms and therefore differences in the current data reflect these biases rather than actual experiences and behaviours. Direct observation of emotional expression and behaviour may help clarify which of these alternatives is currently being measured.

Some limitations of the current study are idiosyncratic. Certain limitations are evident in relation to the adopted definition and criteria used for pubertal status. Only two categories were adopted for ease of analysis based on the presence or absence of axillary hair and its correlation to other

physical developmental factors, i.e., prepubertal and pubertal categories. Therefore caution must be exercised in comparisons between the current study and other findings. Various other more accurate, but time and resource consuming, methods have been used in investigations into this phenomenon. Some researchers have employed medical personal to rate adolescents on Tanner's (1975) 5 stage scale of pubertal development (e.g., Brooks-Gunn & Warren, 1989) or have used parental reports of pubertal development based on schematic drawings of Tanner's stages (e.g., Brooks-Gunn & Warren, 1988). These resources were not available or ethically viable to this researcher. The current results do suggest that pubertal development (as it is evident to others) is involved in some aspects of adolescent emotion (i.e., feeling "fed-up") however and therefore more detailed documentation of pubertal development may clarify the role of puberty in this emotional state and others.

The current study addressed mood variability in terms of experienced frequency and duration of the "fed-up" state. No studies have investigated developmental and gender differences in mood variability for distinct negative emotional states, but rather in the past have tended to lump all "negative" states together (e.g., Larson et al, 1980). Nevertheless, pubertal factors were found to affect one aspect of mood variablilty in the current study , i.e., duration, although firm conclusions cannot be drawn without replication of these results. Further investigations should also broaden the age range to compare relative changes over the lifespan . Other positive and negative everyday states can be similarly addressed in future research.

Other aspects of mood variability were not addressed in this study, e.g., issues of intensity. Previous research has hinted at developmental

changes in perceived intensity of emotions suggesting that adolescents may experience more intensity of emotion than either children or young adults (Larson et al, 1980, Larson & Lampman-Petraitis, 1989). This finding may provide a direction for further investigations into feeling "fed-up" or any other everyday emotional state in adolescence.

The use of open ended questions in the current investigations, whilst fruitful and necessary to fully explore causal and behavioural possibilities, limited the type and degree of statistical analysis performed on the data and thereby its generalizability. Possible confounds must be acknowledged between age and pubertal factors as only descriptive statistics were possible. Subjects tended to respond with various degrees of verbosity, with some reporting one word and others several paragraphs. Undoubtedly this discrepancy reflects differences in academic abilities and ability to describe feelings in written form as well as motivational and cognitive differences. Coding of the open ended data was necessary because of its unmanageable nature in raw form. Problems with this reductionist approach include, its time consuming nature, the loss of some content and thus meaning of the data and some problems with categories previously defined from a selected subset of subjects . Despite these problems the data showed a close similarity to previous findings of adolescent emotional antecedents and coping behaviours.

Several category responses from the open ended questions require further investigation and provide directions future research. Despite the emphasise on sibling rivalry and its effects on familial patterns and states in family assessment and therapy (Barker, 1986), no investigations to date appear to have addressed the effects of siblings on adolescent everyday

moods and the effects of age and puberty on these variables. Although not addressed in this study, the ongoing developmental effects of familial and peer interactions (both content and process) on adolescent mood provide much scope for further research. Similarly the effects of school variables could be approached in the same way as they appear to be a salient part of adolescents life.

In terms of adolescent behaviours associated with feeling "fed-up", certain commonalities are apparent between the current study and those previously discussed, (i.e., Patterson & McCubbin (1987) and Kurdek (1989), suggesting adolescents have a limited but cohort related repertoire of responses available to emotional stimuli. The development of scales designed to measure general adolescent coping strategies is underway with Patterson & McCubbin's ACOPE instrument and these may provide a useful future tool for investigating patterns of adolescent behaviour in response to certain emotional states.

The developmental stability of emotional patterns and their measurement has been the subject of various debates (e.g., Izard & Malatesta, 1984). Although investigations into Izard's (1974) DES have found it to be a consistent and valid measure with various groups (Kotch et al, 1982), few studies have addressed possible item response differences with developmental stage. For example, adolescents may differ from young or older adults in their responses to specific items on the DES. Some items may be more salient to adolescents because they reflect developmental social patterns. For example, the item "(when feeling "fed-up" do you) feel embarrassed when anybody sees you make a mistake" may elicit a higher level of response in adolescents as this group are seen on average to be more

socially self-conscious than adults (Turner & Helm, 1983).

Despite these problems, various investigations have used the DES in many forms and found it to be a useful and reliable measure (see Kotch et al, 1982). The current study used various combined approaches to the DES, i.e.,the childrens'' version and written instructions for it (Kotch et al, 1982) and the use of an imaginal situation (Izard, & Schwartz, 1986). Some changes to the format were necessary however to investigate the profile of emotions present when feeling "fed-up" and the possible effect these changes may have had on the reliability or validity of the instrument must be acknowledged.

Other problems were encountered in administering this scale which relate to its validity in the current study. Some subjects had difficulty in understanding certain "very American" phrases, e.g., "feel like somebody is a good-for-nothing" . Rewording of the DES may overcome some cultural linguistic problems encountered. Another problem centered around the childrens'' lack of familiarity with Likert-type scales, with some losing the motivation to finish. This may have biased the sample in that those who failed to complete the questionnaire may in some way differ in emotional reactivity, e.g., may be more likely to become frustrated and angry and perhaps more "fed-up".

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APPENDIX A

TWO PART FEELING FED-UP QUESTIONNAIRE

SECTION 1

The questions in these forms will help me as a psychologist learn more about teenager's feelings of being "fed-up".

Please **do not** put your name on any forms: I do not need to know your name. All answers are strictly confidential, no one else will see your answers apart from myself. When answering the questions **think about yourself**; do not worry about what your classmates write.

1/ WHAT AGE ARE YOU? _____ Years _____ Months

2/ ARE YOU
(Tick the correct one)
MALE _____
FEMALE _____

DO YOU CONSIDER YOURSELF TO BE?
(Tick the correct one)
Pakaha/European _____
Maori _____
Pacific Islander _____
Other _____ Please specify _____

The next question is concerned with your physical development and might seem a bit strange, however it is **very important** you answer this question.

4/ DO YOU HAVE ANY HAIR IN YOUR ARMPITS LIKE ADULTS DO (Even though you may not have as much)?
(Tick the correct one)
YES _____
NO _____

The next five questions are concerned with feeling "fed-up". When answering them try to think back to times when **you** have felt "fed-up"

5/ HAVE YOU HEARD OR DO YOU USE THE TERM "FEELING FED-UP"?
(e.g., you may say I'm fed-up with things today, etc.)
(Tick the correct one)
YES _____
NO _____

6/ HOW OFTEN DO YOU FEEL "FED-UP"?
(Tick the correct one)

a/ More than once a day _____
b/ Daily _____
c/ A few time per week _____
d/ A few times per month _____
e/ Never _____

7/ WHEN YOU ARE FEELING "FED-UP" HOW LONG DOES IT LAST?
(Tick the correct one)

a/ Up to 1/2 hour _____
b/ 1 hour _____
c/ 1/2 a day _____
d/ A day _____
e/ More than a day _____

8/ LIST AS MANY THINGS AS YOU CAN THAT MAKE YOU FEEL "FED-UP" (e.g., parents, pimples, etc.). Please note these are just examples, think about yourself when answering.

9/ CAN YOU TELL ME WHAT YOU DO WHEN YOU FEEL "FED-UP"? (e.g., do you go to bed, go for a run, etc.). These are just examples, think of what you do.

SECTION 2
DIFFERENTIAL EMOTIONS SCALE

This scale consists of 36 questions which ask how you feel. I want you to **IMAGINE YOU ARE IN A SITUATION WHERE YOU ARE FEELING "FED-UP"** and then go through and answer for each of the 36 questions. Beside each question there are the numbers 1 2 3 4 5. These are arranged in columns with the words, **rarely or never, hardly ever, sometimes, often & very often** at the top.

Rarely or Never	Hardly Ever	Sometimes	Often	Very Often
1	2	3	4	5

I want you to use these numbers to show me the degree to which each question describes the way you feel when you are fed-up.

RECORD YOUR ANSWERS BY CIRCLING THE NUMBER IN THE COLUMN FOR EACH QUESTION.

FOR EXAMPLE
When feeling fed-up do you feel mad at yourself?

If you feel mad at yourself when fed-up only *rarely or never* then you circle the number 1.

If you feel mad at yourself when fed-up *hardly ever* then circle 2

If you feel mad at yourself when fed-up *sometimes* then you circle 3

If you feel mad at yourself when fed-up *often* then you circle 4

If you feel mad with yourself when fed-up *very often* then you circle number 5

Now you are ready to read the questions in this section. Read each question and mark your answer. When you have finished check to see that you have answered all 36 questions. **It is very important that you give an answer for each question.**

D.E.S-IV

WHEN FEELING FED-UP DO YOU...	Rarely or Never	Hardly Ever	Sometimes	Often	Very Often
1/ Feel regret, sorry about something you did.	1	2	3	4	5
2/ Feel sheepish, like you do not want to be seen	1	2	3	4	5
3/ Feel glad about something	1	2	3	4	5
4/ Feel like something stinks, puts a bad taste in your mouth	1	2	3	4	5
5/ Feel you can't stand yourself	1	2	3	4	5
6/ Feel embarrassed when anybody sees you make a mistake	1	2	3	4	5

WHEN FEELING FED-UP DO YOU...	Rarely or Never	Hardly Ever	Sometimes	Often	Very Often
7/ Feel unhappy, blue or downhearted	1	2	3	4	5
8/ Feel surprised, like when something suddenly happens you had no idea would happen	1	2	3	4	5
9/ Feel like somebody is not worth the time of day	1	2	3	4	5
10/Feel shy, like you want to hide	1	2	3	4	5
11/Feel like what you are doing or watching is interesting	1	2	3	4	5
12/Feel scared, uneasy like something might harm you	1	2	3	4	5

WHEN FEELING FED-UP DO YOU...	Rarely or Never	Hardly Ever	Sometimes	Often	Very Often
13/Feel mad at somebody	1	2	3	4	5
14/Feel mad at yourself	1	2	3	4	5
15/Feel happy	1	2	3	4	5
16/Feel like somebody is a "good-for-nothing"	1	2	3	4	5
17/Feel so interested in what you're doing that you are caught up in it	1	2	3	4	5
18/ Feel amazed, like you can't believe what's happening, it was so unusual	1	2	3	4	5
19/ Feel fearful, like you're in danger, very tense	1	2	3	4	5

WHEN FEELING FED-UP DO YOU...	Rarely or Never	Hardly Ever	Sometimes	Often	Very Often
20/ Feel like screaming at somebody or banging on something	1	2	3	4	5
21/ Feel sad and gloomy, almost like crying	1	2	3	4	5
22/ Feel like you did something wrong	1	2	3	4	5
23/ Feel bashful, embarrassed	1	2	3	4	5
24/ Feel disgusted, like something is sickening	1	2	3	4	5
25/ Feel joyful, like everything is rosy	1	2	3	4	5
26/ Feel like people laugh at you	1	2	3	4	5

WHEN FEELING FED-UP DO YOU...	Rarely or Never	Hardly Ever	Sometimes	Often	Very Often
27/ Feel like things are so rotten they could make you sick	1	2	3	4	5
28/ Feel sick about yourself	1	2	3	4	5
29/ Feel like you are better than somebody	1	2	3	4	5
30/ Feel you ought to be blamed for something	1	2	3	4	5
31/ Feel the way you do when something unexpected happens	1	2	3	4	5
32/ Feel alert, curious excited about something	1	2	3	4	5
33/ Feel angry, irritated, annoyed with somebody	1	2	3	4	5

WHEN FEELING FED-UP DO YOU...	Rarely or Never	Hardly Ever	Sometimes	Often	Very Often
34/ Feel discouraged like you can't make it, nothing's going right	1	2	3	4	5
35/ Feel afraid	1	2	3	4	5
36/ Feel like people are looking at you when something goes wrong	1	2	3	4	5

THANKYOU

N.B., This form has been reformatted to allow for binding and therefore the general layout is more cramped than the original form.

APPENDIX B

DESCRIPTIVE STATISTICS SUMMARY TABLES

Summary Statistics Table: Mann-Whitney/Kruskal-Wallis Mean Rank For Frequency/Duration of Feeling Fed-up

		M/W or K/W Mean Rank Frequency	Number of Cases	M/W or K/W Mean Rank Duration	Number of Cases
Sex	Male	117.75	126	113.16	125
	Female	120.41	111	122.47	109
Axillary Hair	Yes	112.26	118	124.25	115
	No	118.92	112	103.47	112
Age	10.5-11.5yrs	127.93	74	110.35	76
	12.0-13.0yrs	126.69	70	108.53	72
	13.6-15.0yrs	108.89	81	116.65	80

Descriptive Statistics Table: Means and Standard Deviations For Frequency and Duration of Feeling Fed-up

	Mean	Std Dev
Frequency	3.1	0.86
Duration	1.3	2.10

Note: Scores could range between 1 & 5. With 1 the least frequency/duration and 5 the most.

Summary Statistics Table for DES Comparsons Between Males and Females

Emotion	DES Mean Male	Female	Between Groups T-Value
Anger	3.53	3.82	-2.44*
Guilt	2.54	2.51	0.34
Shyness	2.29	2.30	-0.08
Joy	2.51	2.13	2.76*
Disgust	2.35	2.55	0.89
Hostility	2.16	2.66	-3.53**
Shame	2.79	2.97	-1.42
Sadness	2.81	3.35	-4.21***
Surprize	2.44	2.28	1.49
Contempt	2.65	2.74	-0.77
Interest	2.55	2.25	2.61*
Fear	2.16	2.27	-0.87

NOTE: Scores ranged from 1-5 with 1 representing "rarely or never" & 5 equalling "very often"

* P<0.01 ** P<0.001 ***P<0.0001

Summary Statistics Table for DES Comparisons Between Prepubertal & Pubertal Subjects

Emotion	DES Mean Prepubertal	DES Mean Pubertal	Between Groups T-Values
Anger	3.56	3.73	1.37
Guilt	2.58	2.53	-0.48
Shyness	2.23	2.37	0.56
Joy	2.43	2.26	-1.21
Hostility	2.23	2.54	1.73
Shame	2.93	2.84	-0.67
Sadness	2.99	3.13	1.02
Surprize	2.39	2.41	0.16
Contempt	2.69	2.68	-0.10
Interest	2.38	2.50	1.03
Fear	2.13	2.31	1.37

NOTE: Scores ranged from 1-5 with 1 representing "rarely or never" & 5 equalling "very often"

* P<0.01 ** P<0.001 ***P<0.0001

Summary Statistics Table for DES Comparisons Between Age Groups

	DES Means For Age			Between Groups
Emotions	10.5-11.5 Yrs	12.0-13.0 Yrs	13.5-15.0 Yrs	F-Values
Anger	3.57	3.64	3.71	1.03
Guilt	2.50	2.59	2.50	0.34
Shyness	2.31	2.23	2.32	0.41
Joy	2.43	2.53	2.10	0.84
Disgust	2.39	2.31	2.51	0.93
Hostility	2.37	2.34	2.43	0.57
Shame	3.23	2.71	2.81	1.23
Sadness	3.06	2.96	3.10	0.75
Surprize	2.46	2.35	2.18	1.82
Contempt	2.76	2.66	2.68	0.33
Interest	2.45	2.55	2.32	1.68
Fear	2.25	2.15	2.21	0.33

NOTE: Scores ranged from 1-5 with 1 representing "rarely or never" & 5 equalling "very often"

* P<0.01 ** P<0.001 ***P<0.0001

Statistics Summary Table for DES Comparison Interactions Sex & Pubertal Status

Emotion			DES Cell Means		Main Effects F Values	2 Way Interaction F Value
ANGER						
			Pubertal Status		1.61	
			Prepubertal	Pubertal		
	Sex	Male	3.41	3.66	4.37*	
		Female	3.77	3.81		0.71
GUILT						
			Pubertal Status		0.21	
			Prepubertal	Pubertal		
	Sex	Male	2.60	2.48	0.02	
		Female	2.54	2.57		0.48
SHYNESS						
			Pubertal Status		0.24	
			Prepubertal	Pubertal		
	Sex	Male	2.31	2.29	0.18	
		Female	2.27	2.43		0.53
JOY						
			Pubertal Status		0.93	
			Prepubertal	Pubertal		
	Sex	Male	2.31	2.71	6.29*	
		Female	2.24	2.05		4.38*

NOTE: Scores ranged from 1-5 with 1 representing "rarely or never" & 5 equalling "very often" * P<0.05 ** P<0.01

Statistics Summary Table for DES Comparison Interactions Sex & Pubertal Status Cont.

Emotion			DES Cell Means		Main Effects F Values	2 Way Interaction F Value
DISGUST			Pubertal Status		0.15	
			Prepubertal	Pubertal		
	Sex	Male	2.39	2.30	3.09	
		Female	2.51	2.65		0.93
HOSTILITY						
			Pubertal Status		1.98	
			Prepubertal	Pubertal		
	Sex	Male	2.09	2.25	15.3*	
		Female	2.60	2.86		0.14
SHAME						
			Pubertal Status		0.80	
			Prepubertal	Pubertal		
	Sex	Male	2.85	2.73	2.27	
		Female	3.05	2.93		0.00
SADNESS						
			Pubertal Status		0.46	
			Prepubertal	Pubertal		
	Sex	Male	2.80	2.82	18.21*	
		Female	3.28	3.45		0.33

NOTE: Scores ranged from 1-5 with 1 representing "rarely or never" & 5 equalling "very often" * P<0.05 ** P<0.01

Statistics Summary Table for DES Comparison Interactions Sex & Pubertal Status Cont.

Emotion			DES Cell Means		Main Effects F Values	2 Way Interaction F Value
SURPRIZE						
			Pubertal Status		0.02	
			Prepubertal	Pubertal		
	Sex	Male	2.48	2.41	0.98	
		Female	2.27	2.40		0.84
CONTEMPT						
			Pubertal Status		0.01	
			Prepubertal	Pubertal		
	Sex	Male	2.69	2.61	0.43	
		Female	2.69	2.76		0.40
INTEREST						
			Pubertal Status		1.56	
			Prepubertal	Pubertal		
	Sex	Male	2.52	2.61	6.08*	
		Female	2.17	2.38		0.21
FEAR						
			Pubertal Status		1.77	
			Prepubertal	Pubertal		
	Sex	Male	2.11	2.22	0.82	
		Female	2.16	2.41		0.28

NOTE: Scores ranged from 1-5 with 1 representing "rarely or never" & 5 equalling "very often" * P<0.05 ** P<0.01